| Case 16-04583 Doc 1 Fill in this information to identify your case: | Filed 02/15/16  | Entered 02/15/16 09:54:16<br>age 1 of 66 | Desc Main                          |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the:                             |   |  |                                    |
| Northern District of: Illinois (State)                              |   |  |                                    |
| Case number (if known)  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |  | Check if this is an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| About Debtor 1:  About Debtor 2 (Spouse Only in a Joint of Deloris First name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport  Bring your picture identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  About Debtor 2 (Spouse Only in a Joint of Spouse Only in a Joint of Spou |        |
|--|--------|
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport  Bring your picture identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  First name  Middle name  Middle name  Last name  Suffix (Sr., Jr., II, III)  First name  Middle name  Middle name  First name  Middle name  Middle name  Middle name  Middle name   | case): |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport  Bring your picture identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  Middle name  Middle name  Middle name  Last name  Suffix (Sr., Jr., II, III)  First name  First name  Middle name  Middle name  Middle name  Middle name  Middle name   |        |
| picture identification (for example, your driver's license or passport  Bring your picture identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  |        |
| license or passport  Bring your picture identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  Last name  Suffix (Sr., Jr., II, III)  First name  First name  Middle name  Middle name   |        |
| identification to your meeting with the trustee.  2. All other names you have used in the last 8 years  Include your married or maiden names.  Suffix (Sr., Jr., II, III)  Suffix (Sr., Jr., II, III)  First name  First name  Middle name  Middle name  |        |
| have used in the last First name  8 years  Middle name Include your married or maiden names.  First name  Middle name  |        |
| have used in the last First name  8 years  Middle name Include your married or maiden names.  First name  Middle name  |        |
| Middle name Include your married or maiden names.  Middle name   |        |
| maiden names.  |        |
| Last name  |        |
| Last name Last name  |        |
| First name First name  |        |
| Middle name Middle name  |        |
| Last name Last name  |        |
| 3. Only the last 4 digits XXX - XX- 8842 XXX - XX-   |        |
| Security number or OR OR   |        |
| federal Individual 9 xx - xx-  Taxpayer  Identification number (ITIN)  |        |

Deloris Case 16-04583 Doc 1 Filed 02/1/5/16 Entered 02/4.5/16 09:54:16 Desc Main Debtor 1 Page 2 of 66 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 5243 W Potomac Apt 1 Number Street Number Street Illinois 60651 Chicago Zip Code City State City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Deloris Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 (09:54:16 Desc Main

Document Document Page 3 of 66 Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District \_\_\_\_ When Case number MM / DD / YYYY 10. Are any bankruptcy ₩ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

Deloris Case 16-04583 Doc 1 Filed 020105/16 Entered 02/415/16/09:54:16 Desc Main Debtor 1 Page 4 of 66 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

Page 5 of 66

Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

## **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this about credit bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this counseling before you bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of file for bankruptcy. completion. completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment following choices. If plan, if any. plan, if any. you cannot do so, you are not eligible to I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from file. an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and If you file anyway, exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required your creditors can you to file this case. you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military combat zone. military combat zone. If you believe you are not required to receive a briefing about If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit credit counseling, you must file a motion for waiver of credit counseling with the court. counseling with the court.

Deloris Case 16-04583 Doc 1 Filed 02615/16 Entered 02615/16 09:54:16 Desc Main Debtor 1 Page 6 of 66 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Deloris ONeal Signature of Debtor 2 Signature of Debtor 1 Executed on \_ 2/15/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Deloris Case 16-04583 Doc 1 Filed 02015/16 Entered 02/15/16 (09/54:16 Desc Main Pirst Name Documents) Page 7 of 66

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rect.                            |        |       |      |                |
|----------------------------------|--------|-------|------|----------------|
| /s/ Marcie Venturini             |        |       | Date | 2/15/2016      |
| Signature of Attorney for Debtor |        |       |      | MM / DD / YYYY |
| Marcie Venturini                 |        |       |      |                |
| Printed name                     |        |       |      |                |
| Semrad Law Firm                  |        |       |      |                |
| Firm name                        |        |       |      |                |
| Number                           | Street |       |      |                |
| City                             |        | State |      | Zip Code       |
| Contact phone                    |        |       |      | Email address  |
| Bar number                       |        |       |      | State          |

<u>Doc 1 Filed 02/15/16 Entered 02/1</u>5/16 09:54:16 Desc Main Fill in this information to identify your case: Debtor 1 Deloris **ONeal** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$60,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$11,569.00 1b. Copy line 62, Total personal property, from Schedule A/B ...... \$71,569.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$142,533.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$19.220.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$161,753.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$4,873.00 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J......

\$4,698.00

Filed 02615/16 Entered 02/4/5/46/09:54:16 Desc Main Documents Page 9 of 66 Doc 1 Debtor 1 Deloris Case 16-04583

| Pa   | Part 4: Answer These Questions for Administrative and Statistical Records  |             |  |  |  |  |  |  |  |  |  |  |
|------|--|-------------|--|--|--|--|--|--|--|--|--|--|
| 6. 4 | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  |             |  |  |  |  |  |  |  |  |  |  |
|      | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.   |             |  |  |  |  |  |  |  |  |  |  |
|      | ✓ Yes.   |             |  |  |  |  |  |  |  |  |  |  |
| 7. \ | 7. What kind of debt do you have?  |             |  |  |  |  |  |  |  |  |  |  |
|      | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. |             |  |  |  |  |  |  |  |  |  |  |
|      | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  |             |  |  |  |  |  |  |  |  |  |  |
| 8.   | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Copy 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  | \$2,900.00  |  |  |  |  |  |  |  |  |  |  |
| 9.   | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:   |             |  |  |  |  |  |  |  |  |  |  |
|      | From Part 4 on Schedule E/F, copy the following:   | Total claim |  |  |  |  |  |  |  |  |  |  |
|      | 9a. Domestic support obligations (Copy line 6a.)   | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9d. Student loans. (Copy line 6f.)   | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)   | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$0.00      |  |  |  |  |  |  |  |  |  |  |
|      | 9g. <b>Total.</b> Add lines 9a through 9f.   | \$0.00      |  |  |  |  |  |  |  |  |  |  |

|  | Case 16-0458   | 3 Doc 1   | Filed 02/15/16  | Entered 02/15   | 5/16 09:54:16   | Desc Main   |
|--|--|---|---|---|---|---|
| Fill in this                                     | information to identify your cas   | e:  |   | Ų.  |   |   |
| Debtor 1   | Deloris  |   | ONeal   | ı   |   |   |
|  | First Name   | Middle N  | Name Last N   | lame  |   |   |
| Debtor 2<br>(Spouse, i                           | f filing) First Name   | Middle N  | Name Last N   | lame  |   |   |
| United Sta                                       | ates Bankruptcy Court for the:   | Northern  | District of Illi  | linois  |   |   |
| Case num   | ber  |   | (S  | State)  |   |   |
| (If known)                                       |  |   |   |   |   | Check if this is an   |
| Officia  | I Form 106A/B  |   |   |   |   | amended filing  |
| Sche   | dule A/B: Prope  | erty  |   |   |   | 12/1  |
| category v<br>responsib<br>write your<br>Part 1: | tegory, separately list and de<br>where you think it fits best. B<br>le for supplying correct info<br>name and case number (if kr<br>Describe Each Residen | e as complete and<br>rmation. If more sp<br>nown). Answer eve<br>nce, Building, L | accurate as possible. It<br>pace is needed, attach a<br>ry question.<br>.and, or Other Real | f two married people a<br>a separate sheet to thi<br>I Estate You Own | re filing together, both<br>s form. On the top of<br>or Have an Interes | n are equally<br>any additional pages,  |
| 1. Do you  | own or have any legal or eq No. Go to Part 2   | uitable interest in a   | any residence, building   | յ, land, or similar prope   | erty?   |   |
|  | Yes. Where is the property?  |   |   |   |   |   |
| 1.1  | Street address, if available, or   | other description   | What is the property? Single-family home  |   | the amount of a   | ecured claims or exemptions. Put<br>ny secured claims on <i>Schedule D:</i><br>Have Claims Secured by Property. |
|  | Number Street  |   | Duplex or multi-unit Condominium or co Manufactured or mo                                   | poperative  | Current value entire property \$120000.00                               |   |
|  | Chicago Illinois City State  Cook County   | 60651<br>Zip Code   | Land Investment property Timeshare Other  |   | Describe the n interest (such a the entireties,                         | nature of your ownership<br>as fee simple, tenancy by<br>or a life estate), if known.                           |
|  |  |   | Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the d                        | lebtors and another<br>u wish to add about th                         | Check if the (see instru  | ·   |
| If you o   | own or have more than one, list  | here:   | property rue  |   |   |   |
| 1.2  | Street address, if available, or   |   | What is the property?  Single-family home   |   | the amount of ar  | ecured claims or exemptions. Put<br>ny secured claims on <i>Schedule D:</i><br>Have Claims Secured by Property. |
|  |  |   | Duplex or multi-unit Condominium or co Manufactured or mo                                   | poperative  | Current value entire property   |   |
|  | Number Street  |   | Land Investment property Timeshare  | ,   | interest (such  | ature of your ownership<br>as fee simple, tenancy by<br>or a life estate), if known.                            |
|  | City State   | Zip Code  | Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the d                        | lebtors and another<br>u wish to add about th                         | cone. Check if the (see instru  | nis is community property<br>actions)   |

| Debtor 1 Deloris Case 16-04583 Doc 1 First Name Middle Name                    | Filed 02/115/16 Entered 02/115/116   | 6/09:54: <u>16 Desc Main</u>   |
|--|--|--|
| 1.3 Street address, if available, or other description                         | Document Page 11 of 66  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home                           | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own? |
| Number Street  City State Zip Code   | Land Investment property Timeshare Other   | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  |
|  | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, | Check if this is community property (see instructions)   |
|  | property identification number:<br>all of your entries from Part 1, including any entries t<br>ere   | 1120000.00   |
|  | in any vehicles, whether they are registered or not? In also report it on Schedule G: Executory Contracts and Unexpected Science (Contracts and Unexpected Science)                                    |  |
| 3.1 Make Chrysler  Model: 200  Year: 2014                                      | Who has an interest in the property? Check one.  Debtor 1 only   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.   |
| Approximate mileage: 41500  Other information: 2014 Chrysler 200 Approx. 41500 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see  | Current value of the entire property? \$10450.00  Current value of the portion you own? \$10450.00   |
| 3.2 Make  Model:  Year:  Approximate mileage:                                  | instructions)  Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only   | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> Creditors Who Have Claims Secured by Property.  Current value of the Current value of the                             |
| Other information:   | Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  | entire property? portion you own?  |

| Debtor 1 | Deloris Case 16-04583 Doc 1 | Filed 020105/16 Entered 02/11/5/11/6                     | 6/09√54: <u>16 Des</u>                               | c Main                                |
|----------|-----------------------------|--|--|---------------------------------------|
|          | First Name Middle Name      | Document Page 12 of 66                                   |  |                                       |
| 3.3      | Make                        | Who has an interest in the property? Check one.          | Do not deduct secured cl<br>the amount of any secure |                                       |
|          | Model: Year:                | Debtor 1 only  | •  | ims Secured by Property.              |
|          | Approximate mileage:        |  | ordinors vino riavo dia                              | ino occarca by 1 roporty.             |
|          |                             | Debtor 2 only  | Current value of the                                 | Current value of the                  |
|          | Other information:          | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |
|          |                             | At least one of the debtors and another                  |  |                                       |
|          |                             | Check if this is community property (see instructions)   |  |                                       |
| 3.4      |                             | Who has an interest in the property? Check               | Do not deduct secured cl                             |                                       |
|          | Model: Year:                | one.   | the amount of any secure                             | ims Secured by Property.              |
|          | Approximate mileage:        | Debtor 1 only  | Creditors with thave Cla                             | iins Secured by Froperty.             |
|          | ···                         | Debtor 2 only  | Current value of the                                 | Current value of the                  |
|          | Other information:          | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |
|          |                             | At least one of the debtors and another                  |  |                                       |
|          |                             | Check if this is community property (see instructions)   |  |                                       |
| 4.1      |                             | Who has an interest in the property? Check               | Do not deduct secured cl                             | •                                     |
| 4.1      | Model:                      | one.   | the amount of any secure                             | •                                     |
|          | Year:                       | Debtor 1 only  | Creditors Who Have Cla                               | ims Secured by Property.              |
|          | Approximate mileage:        | Debtor 2 only  | Current value of the                                 | Current value of the                  |
|          | Other information:          | Debtor 1 and Debtor 2 only                               | entire property?                                     | Current value of the portion you own? |
|          |                             | At least one of the debtors and another                  |  | <u> </u>                              |
|          |                             | Check if this is community property (see                 |  |                                       |
|          |                             | instructions)  |  |                                       |
| 4.2      | Make                        | Who has an interest in the property? Check               | Do not deduct secured cl                             | •                                     |
|          | Model:                      | one.   | the amount of any secure                             |                                       |
|          | Year: Approximate mileage:  | Debtor 1 only  | Creditors who Have Cla                               | ims Secured by Property.              |
|          | Approximate mileage.        | Debtor 2 only  | Current value of the                                 | Current value of the                  |
|          | Other information:          | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |
|          |                             | At least one of the debtors and another                  |  |                                       |
|          |                             | Check if this is community property (see instructions)   |  |                                       |
| E Ada    |                             |  |  |                                       |
|          | • •                         | III of your entries from Part 2, including any entries f | . •  | )450.00                               |

Filed 02615/16 Entered 02/15/16 09:54:16 Desc Main Documeritime Page 13 of 66 

| Do you own or h                           | ave any legal or equitable interest in any of the following items?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|---|---|--|
| 6. Household good                         | s and furnishings   |  |
| Examples: Major ap                        | pliances, furniture, linens, china, kitchenware   |  |
| No  |   |  |
| Yes. Describe                             | Used Furniture  | \$500.00   |
| 7. Electronics                            |   |  |
| Examples: Televisio                       | ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games    |  |
| No  |   |  |
| Yes. Describe                             |   |  |
|   | alue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; oin, or baseball card collections; other collections, memorabilia, collectibles |  |
| No  |   |  |
| Yes. Describe                             |   |  |
|   | poorts and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes iks; carpentry tools; musical instruments                  |  |
| <b>✓</b> No                               |   |  |
| Yes. Describe                             |   |  |
| 10. Firearms Examples: Pistols, r         | fles, shotguns, ammunition, and related equipment   |  |
| Yes. Describe                             |   |  |
| 11. Clothes Examples: Everyda             | v clothes, furs, leather coats, designer wear, shoes, accessories   |  |
| Yes. Describe                             | Used Clothing/Shoes   | \$350.00   |
| 12. Jewelry Examples: Everyday gold, silv | jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, rer   |  |
| Yes. Describe                             | Misc. Jewelry   | \$250.00   |
| 13. Non-farm anima                        |   |  |
| Examples: Dogs, ca                        | tts, birds, horses  |  |
| No Yes. Describe                          |   |  |
| _   | and household items you did not already list including any health side you did not already list.  |  |
| 14. Any other perso                       | nal and household items you did not already list, including any health aids you did not list  |  |
| No  |   |  |
| Yes. Describe                             |   |  |
| 15. Add the dollar v                      | alue of all of your entries from Part 3, including any entries for pages you have attached  | \$1100.00  |
| for Part 3. Write tha                     | t number here   | φ1100.00   |

Debtor 1 Deloris Case 16-04583 Doc 1 Filed 02/115/16 Entered 02/115/116 (09:54:16 Desc Main

rst Name Document Page 14 of 66

**Describe Your Financial Assets** 

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: PWC \$19.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Filed 02615/16 Entered 02615/16 09:54:16 Desc Main Deloris Case 16-04583 Doc 1 Document Page 15 of 66 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

| Debte | or 1     | Deloris Ca<br>First Name                      | ase 1                                 | 6-04583                                 | Doc 1                            |               | 02 <b>0105/16</b><br>cumente       |               |                     | 6≀09ÿ54: <u>16</u>  | Des             | sc Main   |
|-------|----------|---|---------------------------------------|---|----------------------------------|---------------|------------------------------------|---------------|---------------------|---|-----------------|---|
| 24.   |          |   |                                       | <b>tion IRA, in a</b><br>, 529A(b), and |                                  | a qualifie    | d ABLE progra                      | m, or unde    | er a qualified sta  | te tuition program.   |                 |   |
|       |          | No<br>Yes                                     | Institutio                            | on name and d                           | escription. Sep                  | parately file | the records of a                   | ny interests  | .11 U.S.C. § 521(   | (c):  |                 |   |
| 25.   | ехе      | sts, equita<br>rcisable fo<br>No<br>Yes. Desc | r your b                              |   | ts in property                   | (other th     | an anything list                   | ted in line   | 1), and rights or   | powers  |                 |   |
| 26.   | Еха      | ents, copy                                    | rights, t                             |   |                                  |               | intellectual proyalties and licens |               | nents               |   |                 |   |
| 27.   | Еха      | enses, frar                                   | n <b>chises,</b><br>ding peri         |   | eneral intangil<br>licenses, coo |               | ssociation holdin                  | gs, liquor li | censes, professio   | nal licenses  |                 |   |
| Mon   | iey (    | or prope                                      | erty ow                               | ved to you?                             | ?                                |               |                                    |               |                     |   | <b>po</b><br>Do | ortion you own? not deduct secured ims or exemptions. |
| 28.   | <b>✓</b> | Yes. Give s<br>about<br>you al                | pecific ir<br>them, in<br>Iready file |   | er                               |               |                                    |               |                     | Federal: State: Local:  |                 |   |
|       | Exan     | <b>ily suppor</b><br>nples: Past<br>No        |                                       | ımp sum alimo                           | ny, spousal su                   | oport, child  | support, mainte                    | nance, divo   | rce settlement, pro | '   | •               |   |
|       | Ħ        |   | pecific ir                            | nformation                              |                                  |               |                                    |               |                     | Alimony:  Maintenance:  Support:  Divorce settlement  Property settlement | •               |   |
|       | Exan     | <i>nples:</i> Unpa                            | aid wage<br>al Securi                 | -                                       |                                  |               | -                                  | pay, vacatio  | n pay, workers' co  | mpensation,   |                 |   |

| Debt | tor 1      | Deloris Case 16 First Name                          | 6-04583           | Doc 1<br>Middle Name | Filed 02/15/16 Document                                  | <u>Entered</u> @2/415/6<br>Page 17 of 66 | <b>L6</b> (09:54: <u>16</u> D | esc Main   |
|------|------------|---|-------------------|----------------------|--|--|-------------------------------|--|
| 31.  |            | rests in insurance particles: Health, disabi        |                   | rance; health        |  | edit, homeowner's, or renter             | r's insurance                 |  |
|      |            | No<br>Yes. Name the insur<br>of each policy and lis |                   | -                    | Company name:  |  | Beneficiary:                  | Surrender or refund value:   |
| 32.  | If you     |   | of a living trust |                      | neone who has died<br>eeds from a life insurance p       | policy, or are currently entitle         | d to receive                  |  |
| 33.  | Exar       |   |                   |                      | have filed a lawsuit or m<br>ce claims, or rights to sue | ade a demand for paymer                  | nt                            |  |
| 34.  | Othe to se |   | unliquidated      | claims of ev         | ery nature, including co                                 | unterclaims of the debtor                | and rights                    |  |
| 35.  | <b>✓</b>   | financial assets yo No Yes. Describe                | u did not alre    | ady list             |  |  |                               |  |
| 36.  |            |   | -                 |                      |  | es for pages you have att                |                               | \$19.00  |
| Part | 5:         | Describe Any B                                      | usiness-R         | elated Pro           | perty You Own or Ha                                      | ave an Interest In. Lis                  | st any real estate ii         | n Part 1.  |
| 37.  | Do y       | ou own or have an                                   | y legal or equ    | uitable intere       | st in any business-relate                                | d property?                              |                               |  |
|      |            | No. Go to Part 6.<br>Yes. Go to line 38.            |                   |                      |  |  |                               | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.  | <b>✓</b>   | ounts receivable or<br>No<br>Yes. Describe          | commissions       | s you alread         | y earned   |  |                               |  |
| 39.  |            | ce equipment, furn<br>mples: Business-rela          |                   |                      | odems, printers, copiers, fa                             | x machines, rugs, telephone              | es, desks, chairs, electroni  | ic devices   |
|      |            | No<br>Yes. Describe                                 |                   |                      |  |  |                               |  |

|             | tor 1                   | First Name  |                                | Doc 1                       | Filed 02/15/16 Document            | Page 18 of 66               | <b>16/09</b> 09054: <u>16 D</u> | esc Main                                | _ |
|-------------|-------------------------|---|--------------------------------|-----------------------------|------------------------------------|-----------------------------|---------------------------------|---|---|
| 40.         | Mac                     | chinery, fixtures, eq                             | uipment, sup                   | plies you us                | se in business, and tools          | of your trade               |                                 |   |   |
|             | $\overline{\mathbf{A}}$ | No  |                                |                             |                                    |                             |                                 |   |   |
|             |                         | Yes. Describe                                     |                                |                             |                                    |                             |                                 |   |   |
| 41.         | Inve                    | entory  |                                |                             |                                    |                             |                                 |   |   |
|             | <b>✓</b>                | No  |                                |                             |                                    |                             |                                 |   |   |
|             |                         | Yes. Describe                                     |                                |                             |                                    |                             |                                 | ] -                                     |   |
| 42.         | Inte                    | rests in partnershi                               | ps or joint ve                 | entures                     |                                    |                             |                                 | ad .                                    |   |
|             | <b>✓</b>                | No  |                                |                             |                                    |                             |                                 |   |   |
|             |                         | Yes. Give specific                                |                                |                             | Name of entity:                    |                             | % of ownership:                 |   |   |
|             |                         | information about                                 |                                |                             |                                    |                             |                                 | _                                       | _ |
|             |                         | them  |                                |                             |                                    |                             |                                 |   |   |
|             |                         |   |                                |                             |                                    |                             |                                 | _                                       | - |
| 43 <b>(</b> | Susta                   | omer lists, mailing                               | lists or other                 | r compilatio                | ns                                 |                             | -                               | _                                       | - |
| .0.         | _                       | _   |                                | · compilation               |                                    |                             |                                 |   |   |
|             |                         |   | dudo porcopol                  | lly identifiable            | e information (as defined in       | 11                          |                                 |   |   |
|             | ш                       | res. Do your lists int                            | Sidde personal                 | ily identiliable            | e il llottilation (as delilled ill | 11 0.5.0. § 101(417)):      |                                 |   |   |
|             |                         | ☐ No  |                                |                             |                                    |                             |                                 |   |   |
|             |                         | Yes. Descri                                       | ibe                            |                             |                                    |                             |                                 |   | - |
| 44.         | Any                     | business-related p                                | roperty you                    | did not alread              | dy list                            |                             |                                 |   |   |
|             | <b>~</b>                | No  |                                |                             |                                    |                             |                                 |   |   |
|             | =                       | Yes. Give specific                                |                                | •                           |                                    |                             |                                 |   | - |
|             |                         | information                                       |                                |                             |                                    |                             |                                 |   | _ |
|             |                         |   |                                |                             |                                    |                             |                                 |   | _ |
|             |                         |   |                                |                             |                                    |                             |                                 |   |   |
|             |                         |   |                                |                             |                                    |                             |                                 |   | - |
|             |                         |   |                                |                             |                                    |                             |                                 |   | - |
|             |                         |   |                                |                             |                                    |                             |                                 |   | _ |
|             |                         |   |                                |                             |                                    |                             |                                 |   |   |
|             |                         |   | -                              |                             |                                    | for pages you have attach   |                                 |   |   |
| Part        | 6:                      | Describe Any F                                    | arm- and (<br>interest in farm | Commercion land, list it in | al Fishing-Related P               | roperty You Own or I        | lave an Interest In             | ).                                      |   |
| 46.         | Do                      | you own or have ar                                | ny legal or eq                 | uitable inter               | rest in any farm- or comm          | ercial fishing-related prop | erty?                           |   |   |
|             |                         | No. Go to Part 7.                                 |                                |                             |                                    |                             |                                 | Current value of the                    | ; |
|             | Ħ                       | Yes. Go to line 47.                               |                                |                             |                                    |                             |                                 | portion you own?  Do not deduct secured | , |
|             |                         |   |                                |                             |                                    |                             |                                 | claims                                  |   |
|             | _                       |   |                                |                             |                                    |                             |                                 | or exemptions                           |   |
| 47.         |                         | <b>m animals</b><br><i>mpl</i> es: Livestock, pou | ultry, farm-raise              | ed fish                     |                                    |                             |                                 |   |   |
|             |                         |   | ,, 10100                       |                             |                                    |                             |                                 |   |   |
|             | 뇓                       | No<br>Voa Dogoriba                                |                                |                             |                                    |                             |                                 | 1                                       |   |
|             | Ш                       | Yes. Describe                                     |                                |                             |                                    |                             |                                 |   | _ |

| Deb          | tor 1 Deloris Case 16-04583<br>First Name                                 |                                 | <u>d 02∮16/16</u><br>ocumente | Entered 02/e      | 1 <b>5/16</b> /09:54: <u>16</u> | Desc  | <u>Main</u>  |
|--------------|---|---------------------------------|-------------------------------|-------------------|---------------------------------|-------|--------------|
| 48.          | Crops-either growing or harvest   |                                 | Scament                       | rage 15 or o      | <u> </u>                        |       |              |
|              | <b>✓</b> No   |                                 |                               |                   |                                 |       |              |
|              | Yes. Describe   |                                 |                               |                   |                                 | _     |              |
| 49.          | Farm and fishing equipment, imp   | olements, machinery, fi         | xtures, and tools             | s of trade        |                                 |       |              |
|              | ✓ No  |                                 |                               |                   |                                 |       |              |
|              | Yes. Describe   |                                 |                               |                   |                                 | _     |              |
| F0           | Farm and fishing supplies, chem   | icals and food                  |                               |                   |                                 |       |              |
| 50.          |   | icais, and leed                 |                               |                   |                                 |       |              |
|              | ✓ No  Yes. Describe   |                                 |                               |                   |                                 |       |              |
|              |   |                                 |                               |                   |                                 |       |              |
| 51.          | Any farm- and commercial fishing<br>Examples: Livestock, poultry, farm-ra |                                 | did not already lis           | st                |                                 |       |              |
|              | ✓ No  |                                 |                               |                   |                                 |       |              |
|              | Yes. Describe   |                                 |                               |                   |                                 | _     |              |
|              |   |                                 |                               |                   |                                 |       |              |
|              | dd the dollar value of all of your er                                     |                                 |                               |                   |                                 |       |              |
| TOT P        | art 6. Write that number here   |                                 |                               |                   | <b>&gt;</b>                     |       |              |
|              |   |                                 |                               |                   |                                 |       |              |
| Part         | 7: Describe All Property Yo   | ou Own or Have ar               | Interest in TI                | hat You Did Not L | _ist Above                      |       |              |
| 53.          | Do you have other property of an<br>Examples: Season tickets, country cli | y kind you did not alre         | ady list?                     |                   |                                 |       |              |
|              | No No   | петпетынр                       |                               |                   |                                 |       |              |
|              | Yes. Give specific  |                                 |                               |                   |                                 |       |              |
|              | information   |                                 |                               |                   |                                 |       |              |
|              |   |                                 |                               |                   |                                 |       |              |
|              |   |                                 |                               |                   |                                 |       |              |
| 54. A        | dd the dollar value of all of your er                                     | ntries from Part 7. Write       | e that number he              | re                |                                 | •     |              |
|              |   |                                 |                               |                   |                                 |       |              |
| Part         | 8: List the Totals of Each I  | Part of this Form               |                               |                   |                                 |       |              |
|              |   |                                 |                               |                   |                                 |       | \$120000.00  |
| 55. <b>F</b> | Part 1: Total real estate, line 2   |                                 |                               |                   | ▶                               |       | <u> </u>     |
| 56. <b>p</b> | part 2 total vehicles, line 5   |                                 | \$10450.0                     | 00                |                                 |       |              |
| 57. <b>P</b> | art 3: Total personal and househo   | ld items, line 15               | \$1100.00                     | )                 |                                 |       |              |
| 58. <b>P</b> | art 4: Total financial assets, line 36                                    | i                               | \$19.00                       |                   |                                 |       |              |
| 59. <b>F</b> | Part 5: Total business-related prop                                       | erty, line 45                   |                               |                   |                                 |       |              |
| 60. <b>F</b> | Part 6: Total farm- and fishing-rela                                      | ted property, line 52           |                               |                   |                                 |       |              |
| 61. <b>F</b> | Part 7: Total other property not list                                     | ed, line 54                     |                               |                   |                                 |       |              |
| 62. 1        | Fotal personal property. Add lines 5                                      | 6 through 61                    | \$11569.0                     | 10                |                                 |       | + \$11569.00 |
|              |   |                                 | ψ11000.0                      | -                 | Copy personal property to       | tal ► | . 471000.00  |
|              |   |                                 |                               |                   |                                 |       | \$131569.00  |
| 63. <b>T</b> | otal of all property on Schedule A  | <b>B.</b> Add line 55 + line 62 |                               |                   |                                 |       |              |

| Filli                                       | n this inform   | Case 16-04583 ation to identify your case:  | Doc 1  | Filed 02/   | 15/16 F   | Intered 02/1   | 5/16 09:54:16   | Desc Main   |
|---|---|---|--|---|---|--|---|---|
|   | otor 1  | Deloris   |  |   | ONeal   |  |   |   |
|   | otor 2  | First Name  |  | lle Name  | Last Nam  |  |   |   |
|   |   | First Name  |  | lle Name  | Last Nam  |  |   |   |
|   |   | ankruptcy Court for the:  | Northern   | L   | istrict of <u>Illino</u><br>(Stat   |  |   |   |
|   | e number<br>nown)   |   |  |   |   |  |   | -   |
| Of  | ficial F  | orm 106C  |  |   |   |  |   | Check if this is a amended filing   |
| Sc  | hedul   | C: The Prop   | erty Yo  | ou Claim  | as Exe  | mpt  |   | 12/1  |
| For<br>s to<br>exer<br>exer<br>exer<br>orop | each iten o state a s mpted up eive certa mption of perty is d  Itel Which set You ar | pecific dollar amour<br>to the amount of an<br>in benefits, and tax-                | aim as exem by applicate exempt re exempt re to value und I that amou Claim as E laiming? Che nonbankrupto | mpt, you must pt. Alternative ole statutory tirement funder a law that unt, your exercise exempt executions. 11 § 522(b)(2) | st specify to rely, you may limit. Some ds—may be a limits the emption wo | the amount of ay claim the fue exemptionse unlimited in exemption to auld be limited e is filing with you. | Ill fair market value —such as those for dollar amount. How a particular dollar to the applicable s | claim. One way of doing so<br>e of the property being<br>r health aids, rights to<br>wever, if you claim an<br>amount and the value of the<br>statutory amount. |
|   |   | ription of the property ar<br>lle A/B that lists this prop                          |  | rent value of portion you   | Amount of the exemption you cla   |  |   | cific laws that allow exemption   |
|   |   |   |  | the value from edule A/B  | Check Only C  | one box for each exe   | етриоп.   |   |
|   | Brief   | 5243 W. Potomac A   | pt. 1,   | 60,000.00   | п   |  |   | 735 ILCS 5/12-901   |
|   | description Line from Schedule A  |   |  |   |   | fair market value, u   | p to any  |   |
|   | Brief   | lland Franciscon  |  | \$500.00  |   | ordinately minic   |   | 735 ILCS 5/12-1001(b)   |
|   | description Line from Schedule A  |   |  | φουσ.συ   |   | \$500.00<br>fair market value, u<br>ble statutory limit  | p to any  |   |
| 3.  | (Subject to   | aiming a homestead exer<br>adjustment on 4/01/16 and<br>id you acquire the property | every 3 years  | after that for case   | 5?<br>es filed on or aft  | er the date of adjus   | ,   |   |

No Yes

Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Main Documente Page 21 of 66  $\begin{array}{c} \text{Debtor 1} & \frac{\text{Deloris} Case \ 16\text{-}04583}{\text{First Name}} & \frac{\text{Doc 1}}{\text{Middle Name}} \end{array}$ 

| Addition                                   | nai Page  |   |   |                                    |
|--|---|---|---|------------------------------------|
| •  | tion of the property and line<br>A/B that lists this property | Current value of<br>the portion you<br>own  Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
| Brief description: Line from Schedule A/B: | Used Clothing/Shoes   | \$350.00  | \$350.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a)              |
| Brief description: Line from Schedule A/B: | PWC 17  | \$19.00   | \$19.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief description: Line from Schedule A/B: | Misc. Jewelry   | \$250.00  | \$250.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |

|        |                                       | Case 16-04583  | Doc 1 Filed  | 02/15/16 Entered 02/15   | /16 00·E4·16   | Dogo Main                                    |                          |
|--------|---------------------------------------|--|--|--|--|--|--------------------------|
| Fill i | n this informa                        | ation to identify your case:   | DOCT FIEO  | 02/15/16 Fillered 02/1,3   | 710 09.54.10   | Desc Main                                    |                          |
| Deb    | tor 1                                 | Deloris  |  | ONeal  |  |  |                          |
|        |                                       | First Name   | Middle Name  | Last Name  |  |  |                          |
|        | tor 2<br>buse, if filing)             | First Name   | Middle Name  | Last Name  |  |  |                          |
| Unit   | ed States Ba                          | nkruptcy Court for the: No   | orthern  | District of Illinois   |  |  |                          |
|        |                                       | _  |  | (State)  |  |  |                          |
|        | e number<br>nown)                     |  |  |  |  |  |                          |
| Of     | ficial F                              | form 106D  |  |  |  |  | eck if this is an        |
| Sc     | hedul                                 | le D: Creditor   | s Who Hav  | ve Claims Secured  | by Prope   |  | 12/1                     |
| corr   | Do any cred No. Ch                    | nation. If more space<br>top of any additional<br>ditors have claims secured | is needed, copy to pages, write your by your property? | rried people are filing togethe he Additional Page, fill it out, name and case number (if kn rother schedules. You have nothing else | number the entri<br>own).                              |  |                          |
|        |                                       |  | more than one secured                                  | claim, list the creditor separately for each   | Column A   | Column B                                     | Column C                 |
|        | claim. If mor                         |  | ticular claim, list the oth                            | er creditors in Part 2. As much as   | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1    | City of Chica                         | ago Water Department   | Describe the propert                                   | y that secures the claim:  | \$2,200.00   | \$120,000.00                                 | \$0.00                   |
|        | 333 S State, Suite 300  Number Street |  | - 5243 W. Potomac Apt.<br>\$120,000.00                 | 1, Chicago, IL 60651   Value:  | ]  |  |                          |
|        |                                       |  |  | e, the claim is: Check all that apply.   | <u> </u>   |  |                          |
|        | Chicago                               | Illinois 60604   | Contingent   |  |  |  |                          |
|        | City<br>Who owes                      | State ZIP Code the debt? Check one.  | Unliquidated   |  |  |  |                          |
|        | Debtor                                |  | Disputed   |  |  |  |                          |
|        | Debtor 2                              | •  | Nature of lien. Check                                  | all that apply.  |  |  |                          |
|        | Debtor '                              | 1 and Debtor 2 only  | An agreement you car loan)                             | u made (such as mortgage or secured  |  |  |                          |
|        | At least another                      | one of the debtors and   | _  | h as tax lien, mechanic's lien)  |  |  |                          |
|        |                                       | if this claim relates to a   | Judgment lien from                                     | n a lawsuit  |  |  |                          |
|        | commu                                 | ınity debt   | Other (including a                                     | right to offset)   |  |  |                          |
|        | Date debt w                           | vas incurred   | Last 4 digits of acco                                  | unt number   | _  |  |                          |
|        | ļ                                     | Add the dollar value of you  |  | on this page. Write that number  | \$2,200.00   |  |                          |
|        |                                       | nere:  |  | . 3  |  |  |                          |

| E:II :                       | Alaia informa                                   | Case 16-04583   |  | 02/15/16   | Entered 02   | / <mark>1</mark> 5/16 09:54:16                     | Desc                               | Main                         |                               |
|------------------------------|---|---|--|--|--|--|------------------------------------|------------------------------|-------------------------------|
| FIII IN                      | tnis informa                                    | ation to identify your case   |  |  |  |  |                                    |                              |                               |
| Debto                        |   | Deloris   |  | ONeal  |  |  |                                    |                              |                               |
| Date                         |   | First Name  | Middle Name  | Last N   | ame  |  |                                    |                              |                               |
| Debto<br>(Spou               |   | First Name  | Middle Name  | Last N   | ame  |  |                                    |                              |                               |
| Unite                        | d States Ba                                     | nkruptcy Court for the:   | Northern   | District of III  | inois<br>State)  |  |                                    |                              |                               |
| Case<br>(If kno              | number<br>wn)                                   |   |  |  |  |  |                                    |                              |                               |
| Offi                         | cial Fo   | rm 106E/F   |  |  |  |  | Chec                               | ck if this is an             | amended filing                |
| Scl                          | hedu  | le E/F: Cre   | ditors Who   | Have U   | nsecure  | d Claims   |                                    |                              | 12/15                         |
| 106Å/E<br>are list<br>the bo | B) and on Sted in Sche<br>exes on the           | Schedule G: Executory edule D: Creditors Who left. Attach the Contin                        | xpired leases that could<br>Contracts and Unexpire<br>o Hold Claims Secured b<br>tuation Page to this page<br>Y Unsecured Claims                     | d Leases (Officially Property. If moe. On the top of a           | al Form 106G). Do i<br>ore space is neede                    | not include any credito<br>d, copy the Part you ne | ors with parti<br>eed, fill it out | ally secured<br>, number the | l claims that<br>e entries in |
| 1.                           |   | ditors have priority unso to Part 2.  | secured claims against y   | ou?  |  |  |                                    |                              |                               |
| i<br>I<br>I                  | identify wha<br>possible, list<br>Part 1. If mo | t type of claim it is. If a cla<br>t the claims in alphabetic<br>ore than one creditor hold | claims. If a creditor has maim has both priority and no all order according to the cross a particular claim, list the laim, see the instructions for | npriority amounts<br>editor's name. If y<br>e other creditors in | , list that claim here a<br>ou have more than t<br>n Part 3. | and show both priority and                         | d nonpriority a                    | amounts. As r                | much as                       |
|                              |   |   |  |  |  |  | Total claim                        | Priority amount              | Nonpriority amount            |
|                              |   |   |  |  |  |  |                                    |                              |                               |

Filed 02/115/16 Entered 02/115/16 09:54:16 Desc Main Doc 1 Debtor 1 Documernt Page 24 of 66 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.  $\overline{\phantom{a}}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Check N Go - Western \$550.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 6311 S Western Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60636 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 City of Chicago Parking \$4,500.00 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60602 Chicago Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 ComEd \$1,300.00 Last 4 digits of account number Nonpriority Creditor's Name 3 Lincoln Čenter When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Oakbrook Terrace Illinois 60181 Unliquidated Citv Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

Debtor 1 Deloris Case 16-04583 First Name Filed 02615/16 Entered 02/15/16/09/54:16 Desc Main Document Page 25 of 66

Doc 1

| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth.  | Total claim |
|---|---|-------------|
| COMENITY BANK/ASHSTWRT  | Last 4 digits of account number   | \$179.00    |
| Nonpriority Creditor's Name<br>PO BOX                         | When was the debt incurred? 5/1/2015  |             |
| Number Street   |   |             |
|   | As of the date you file, the claim is: Check all that apply.  Contingent                                |             |
| Columbus Ohio 43218   |   |             |
| City State Zip Code Who incurred the debt? Check one.         | Unliquidated  |             |
| Debtor 1 only   | Disputed  |             |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 and Debtor 2 only                                    | Student loans   |             |
| At least one of the debtors and another                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| Check if this claim relates to a community debt               | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Is the claim subject to offset?                               | ✓ Other. Specify  |             |
| ✓ No  |   |             |
| Yes   |   |             |
| CREDIT ONE BANK NA Nonpriority Creditor's Name                | Last 4 digits of account number   | \$331.00    |
| PO BOX 98875  | When was the debt incurred? 8/1/2015  |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   | As of the date you file, the claim is: Check all that apply.  Contingent                                |             |
| LAS VEGAS Nevada 89193  | Unliquidated  |             |
| City State Zip Code Who incurred the debt? Check one.         | Disputed  |             |
| Debtor 1 only   |   |             |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 and Debtor 2 only                                    | Student loans   |             |
| At least one of the debtors and another                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| Check if this claim relates to a community debt               | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Is the claim subject to offset?                               | ✓ Other. Specify  |             |
| ✓ No  |   |             |
| Yes   |   |             |
| PEOPLES GAS   | Last 4 digits of account number   | \$500.00    |
| Nonpriority Creditor's Name<br>130 E. RANDOLPH DRIVE          |   |             |
| Number Street   | When was the debt incurred?n/a  |             |
|   | As of the date you file, the claim is: Check all that apply.  |             |
| CHICAGO Illinois 60601  | Contingent  |             |
| City State Zip Code   | Unliquidated  |             |
| Who incurred the debt? Check one.  Debtor 1 only              | Disputed  |             |
| Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 and Debtor 2 only                                    | Student loans   |             |
| At least one of the debtors and another                       | Obligations arising out of a separation agreement or divorce that                                       |             |
| <b>'</b>  | you did not report as priority claims   |             |
| Check if this claim relates to a community debt               | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Is the claim subject to offset?  No                           | ✓ Other. Specify  |             |

Yes

Filed 02015/16 Entered 02/15/16/09:54:16 Desc Main Document Page 26 of 66 ims - Continuation Page 

|     | After listing any entries on this page, number them beginning   |  | Total claim |
|-----|---|--|-------------|
|     |   | with 4.5, followed by 4.0, and 50 forth.   |             |
| 4.7 | STELLAR RECOVERY INC Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10 Number Street   | Last 4 digits of account number 8217 When was the debt incurred? 12/1/2015  As of the date you file, the claim is: Check all that apply.   | \$548.00    |
|     | Jacksonville Florida 32216 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No  Yes | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify |             |
| 4.8 | WESTLAKE FIN Nonpriority Creditor's Name 4751 WILSHIRE BVLD SUITE 100 Number Street  LOS ANGELES California 90010   | Last 4 digits of account number 2327  When was the debt incurred? 6/1/2015  As of the date you file, the claim is: Check all that apply.  Contingent   | \$11,312.00 |
|     | City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  No  Yes                              | Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify           |             |

Debtor 1 Deloris Case 16-04583 Doc 1 Filed 02615/16 Entered 02/415/16 (09:54:16 Desc Main First Name Documentum Page 27 of 66

Add the Amounts for Each Type of Unsecured Claim

|                          | Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. |   |     |              |  |  |  |  |
|--------------------------|--|---|-----|--------------|--|--|--|--|
|                          |  |   |     | Total claims |  |  |  |  |
| Total claims from Part 1 | 6a.  | Domestic support obligations.   | 6a. | \$0.00       |  |  |  |  |
|                          | 6b.  | Taxes and certain other debts you owe the   | 6b. | \$0.00       |  |  |  |  |
|                          | 6c.  | Claims for death or personal injury while you were intoxicated  | 6c. | \$0.00       |  |  |  |  |
|                          | 6d.  | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$0.00       |  |  |  |  |
|                          | 6e.  | Total. Add lines 6a through 6d.   | 6e. | \$0.00       |  |  |  |  |
|                          |  |   |     | Total claims |  |  |  |  |
| Total claims from Part 2 | 6f.  | Student loans   | 6f. | \$0.00       |  |  |  |  |
| from Part 2              | 6g.  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00       |  |  |  |  |
|                          | 6h.  | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$0.00       |  |  |  |  |
|                          | 6i.  | Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. | \$19,220.00  |  |  |  |  |
|                          | 6j.  | Total. Add lines 6f through 6i.   | 6j. | \$19,220.00  |  |  |  |  |

| Fill in this inform    | Case 16-04583                   |   | )2/15/16               | Entered 02/1                | 5/16 09:54:16             | Desc Main  |
|------------------------|---------------------------------|---|------------------------|-----------------------------|---------------------------|--|
| Debtor 1               | Deloris                         |   | ONeal                  |                             |                           |  |
| Debtor 2               | First Name                      | Middle Name   | Last Na                | ame                         |                           |  |
| (Spouse, if filing     | First Name                      | Middle Name   | Last Na                | ame                         |                           |  |
|                        | ankruptcy Court for the:        | Northern  | District of Illi<br>(S | nois<br>tate)               |                           |  |
| Case number (If known) |                                 |   |                        |                             |                           |  |
| Official               | Form 106G                       |   |                        |                             |                           | Check if this is an amended filing                               |
| Schedul                | le G: Executo                   | ory Contracts   | and Un                 | expired Le                  | eases                     | 12/1   |
| •                      | d, copy the additional pa       |   |                        |                             |                           | ing correct information. If more onal pages, write your name and |
| 1. Do you h            | ave any executory o             | ontracts or unexpire                                    | d leases?              |                             |                           |  |
| ✓ No. Che              | eck this box and file this forr | n with the court with your oth                          | er schedules. Yo       | u have nothing else t       | o report on this form.    |  |
| Yes. Fill              | in all of the information bel   | ow even if the contracts or le                          | eases are listed       | on <i>Schedule A/B: Pro</i> | perty (Official Form 106A | /B).   |
| •                      |                                 | pany with whom you have structions for this form in the |                        |                             |                           | ase is for (for example, rent, id unexpired leases.              |
| Persor                 | n or company with whom          | you have the contract or l                              | lease                  |                             | State what the contrac    | t or lease is for  |
|                        |                                 |   |                        |                             |                           |  |

|                |                 | Case 16-0458  | 3 Doc 1 Filed (   | 02/15/16 Entere                                    | d 02/15      | /16 00·5 <i>1</i> ·16  | 6 Desc Main  |                            |
|----------------|-----------------|---|---|--|--------------|------------------------|--|----------------------------|
| Fill in        | this informa    | ation to identify your case   |   | J//I.J/III   | J. (777 . 5) | 110 03.34.10           | Desc Main  |                            |
| Debto          | or 1            | Deloris<br>First Name   | Middle Name   | ONeal<br>Last Name                                 |              |                        |  |                            |
| Debto<br>(Spou |                 | First Name  | Middle Name   | Last Name  |              |                        |  |                            |
|                |                 | nkruptcy Court for the:   | Northern  | District of Illinois                               |              |                        |  |                            |
|                | number          |   |   | (State)  |              |                        |  |                            |
| (If kno        | ,               | orm 106H  |   |  |              |                        | Check i amende   | if this is an<br>ed filing |
| Sch            | nedule          | H: Your Co  | debtors   |  |              |                        |  | 12/15                      |
| n the          |                 |   |   |  |              |                        | age, fill it out, and number th<br>d case number (if known). An                          |                            |
| 1.             | Do you h No Yes | ave any codebtors? (If  | you are filing a joint case, do   | not list either spouse as a co                     | odebtor.)    |                        |  |                            |
| 2.             | Idaho, Lou      | uisiana, Nevada, New Me<br>Go to line 3.<br>Did your spouse, former<br>No | u lived in a community pro<br>exico, Puerto Rico, Texas, Wa<br>spouse, or legal equivalent li | shington, and Wisconsin.) ve with you at the time? |              |                        | e <i>rritori</i> es include Arizona, Califo<br>ddress of that person.                    | rnia,                      |
|                |                 | Name of your spouse, for  | ormer spouse, or legal equiva   | lent   |              |                        |  |                            |
|                |                 | Number Street   |   |  |              |                        |  |                            |
|                |                 | City  | State   | Zip Code   |              |                        |  |                            |
| 3.             | again as        | a codebtor only if that   | person is a guarantor or c  | osigner. Make sure you ha                          | ve listed th | e creditor on Sche     | . List the person shown in linedule D (Official Form 106D), dule G to fill out Column 2. |                            |
|                | Column          | 1: Your codebtor  |   |  |              |                        | to whom you owe the debt   |                            |
|                |                 |   |   |  | Check        | k all schedules that a | apply:   |                            |
| 3.1            | ONeal, Ea       | arnest  |   |  | — <b>Z</b>   | Schedule D, line       | 2.2;   |                            |
|                | Number          | Street  |   |  | _ 빌          | Schedule E/F, line     |  |                            |
|                | INGITIDE        | Olioot  |   |  |              | Schodulo C lino        |  |                            |

Zip Code

City

State

Schedule G, line

| Let as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code City State Zip Code  | Fill in th            | nis information to identify                      | y your case:  | 04540 -          | 100/1                 | 5/16 09:54:16 | Desc Mai    | n        |
|--|-----------------------|--|---|------------------|-----------------------|---------------|-------------|----------|
| Pist Name  |                       | •  | Doca  | •                | , <del>30 01 00</del> |               |             |          |
| Debtor 2 Spouse, if filling) First Name  | Debtor 1              |  |   |                  |                       |               |             |          |
| Spouse, if filing) First Name  |                       | First Name                                       | Middle Name   | Last Name        |                       | Check if      | this is:    |          |
| United States Bankruptcy Court for the: Northern District of Illinois (State)    A supplement showing post-petition chapter 1 expenses as of the following date: (State)    A supplement showing post-petition chapter 1 expenses as of the following date: (State)    Describer   |                       | :  |   |                  |                       | _             |             |          |
| United States Bankrupticy Court for the:    Normen   | (Spouse, i            | First Name                                       | Middle Name   | Last Name        |                       |               | ŭ           |          |
| Case number   MM / DD / YYYY      If known)  | United Sta            | ates Bankruptcy Court for the:                   | Northern  |                  |                       |               |             |          |
| Le as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, not clude information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation Employer's address  City State Zp Code City State Zp Code  |                       | nber   |   | (Oldio)          |                       | MM            | / DD / YYYY |          |
| esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, not ludde information about your spouse. If you are separated and your spouse is not filling with you, do not include formation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code City State Zip Code  |                       | _  | come  |                  |                       |               |             | 12/15    |
| If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employent status  □ Employed □ Not Employed □ | nformat<br>ages, v    | tion about your spouse<br>vrite your name and ca | e. If more space is need<br>se number (if known). A | ed, attach a sep | arate sheet           |               |             |          |
| If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employment status    Employed  | 1.                    |  |   | Debtor 1         |                       | Debto         | or 2        |          |
| If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code City State Zip Code  |                       | information.                                     | Employment status                                   |                  |                       |               |             |          |
| attach a separate page with information about additional employers.  Employer's name  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code  City State Zip Code   |                       | If you have more than one                        | Employment status                                   |                  |                       |               |             |          |
| information about additional employers.  Employer's name  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code  Employer's address  Number Street  Number Street  Number Street  Number Street  City State Zip Code   |                       |  |   | ✓ Not Employed   |                       | ✓ Not         | Employed    |          |
| employers.  Employer's name  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Number Street  Number Street  City State Zip Code  City State Zip Code  |                       |  | Occupation  |                  |                       |               |             |          |
| or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code City State Zip Code   |                       |  | ·   |                  |                       |               |             |          |
| or self-employed work.  Occupation may include student or homemaker, if it applies.  City State Zip Code  Number Street  Number Street   |                       | Include part time, seasonal,                     | Fmplover's address                                  |                  |                       |               |             |          |
| student or homemaker, if it applies.  City State Zip Code City State Zip Code  |                       |  | Employer 5 dddress                                  | Number Street    |                       | Number        | Street      |          |
| student or homemaker, if it applies.  City State Zip Code City State Zip Code  |                       | Occupation may include                           |   | -                |                       |               |             |          |
| City State Zip Code City State Zip Code  |                       |  |   |                  |                       |               |             |          |
|  |                       | or homemaker, if it applies.                     |   |                  |                       |               |             |          |
| How long employed there?   |                       |  |   | City             | State Zij             | Code City     | State       | Zip Code |
|  |                       |  | How long employed there?                            |                  |                       |               |             |          |
|  | <ol><li>Est</li></ol> | imate and list monthly overt                     | ime pay.  | 3.               |                       | + \$0.00      | + \$0.00    |          |

4. Calculate gross income. Add line 2 + line 3.

\$0.00

\$0.00

Filed 02/145/16 Debtor 1 Deloris Case 16-04583 Entered @2415/16 @9:54:16 Desc Main Doc 1 Documentame Page 31 of 66 Middle Name For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$0.00 \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$600.00 \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$773.00 \$1,200.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 \$2,300.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. -\$0.00 \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,373.00 \$3,500.00 10. Calculate monthly income. Add line 7 + line 9. \$3,500.00 \$4,873.00 10 \$1,373.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$4,873.00 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

|                               | Case 16-0458                                 | 3 Doc 1 Filed 0:  | 2/15/16 Entered (   | <u>12/1</u> 5/16 09:54:16 | Desc Main                                |             |
|-------------------------------|--|---|---|---------------------------|--|-------------|
| Fill in this infor            | mation to identify your cas                  |   | <u> </u>  |                           |  |             |
| Debtor 1                      | Deloris                                      |   | ONeal   |                           |  |             |
|                               | First Name                                   | Middle Name   | Last Name   | _                         |  |             |
| Debtor 2                      |  |   |   | Check if this is:         |  |             |
| (Spouse, if filin             | g) First Name                                | Middle Name   | Last Name   | An amended fili           | ng                                       |             |
| United States                 | Bankruptcy Court for the:                    | Northern  | District of Illinois (State)                                |                           | howing post-petition the following date: | chapter 13  |
| Case number (If known)        |  |   |   |                           |  |             |
|                               | Form 106J                                    |   |   | WINT DD / TTT             | 1  |             |
| 3chedu                        | le J: Your Ex                                | rpenses   |   |                           |  | 12/15       |
| nformation. If if known). Ans | more space is needed, swer every question.   | ble. If two married people are<br>attach another sheet to this f    |   |                           |  | ər          |
| 1. Is this a joi              |  |   |   |                           |  |             |
| ✓ No. G                       | o to line 2                                  |   |   |                           |  |             |
| Yes. D                        | oes Debtor 2 live in a se                    | eparate household?  |   |                           |  |             |
| ]                             | No   |   |   |                           |  |             |
| [                             | Yes. Debtor 2 must file                      | e Official Forms 106J-2, <i>Expens</i>                              | ses for Separate Household of I                             | Debtor 2.                 |  |             |
| 2. <b>Do you ha</b> v         | ve dependents?                               | No  |   |                           |  |             |
| Do not list Debtor 2.         |  | es. Fill out this information for each dependent                    | Dependent's relationshi<br>Debtor 1 or Debtor 2<br>Relative | p to Dependent's age      | Does depende with you?                   | ent live    |
|                               |  |   |   |                           | ✓ Yes.                                   |             |
|                               |  |   | Relative  |                           | No.                                      |             |
|                               |  |   |   |                           | ✓ Yes.                                   |             |
|                               | penses include of people other               | No  |   |                           |  |             |
| than                          |  | ′es   |   |                           |  |             |
| yourself an<br>dependent      | •  |   |   |                           |  |             |
| Part 2: Esti                  | mate Your Ongoing                            | Monthly Expenses  |   |                           |  |             |
| •                             | of a date after the bank                     | ankruptcy filing date unless y<br>ruptcy is filed. If this is a sup | •   |                           | •  |             |
|                               |  | cash government assistance to n Schedule I: Your Income             |   |                           | You                                      | ır expenses |
|                               | or home ownership exporthe ground or lot. 4. | penses for your residence. Inc                                      | clude first mortgage payments a                             | and                       | 4.                                       | \$1,170.00  |
| If not inc                    | luded in line 4:                             |   |   |                           |  |             |
| 4a. Real e                    | estate taxes                                 |   |   |                           | 4a                                       | \$0.00      |
| 4b. Prope                     | rty, homeowner's, or rente                   | r's insurance   |   |                           | 4b.                                      | \$0.00      |
| 4c. Home                      | maintenance, repair, and u                   | ıpkeep expenses   |   |                           | 4c.                                      | \$0.00      |

\$0.00

4d.

4d. Homeowner's association or condominium dues

ebtor 1 Deloris Case 16-04583 Doc 1 Filed 02/115/16 Entered 02/15/16 (09:54:16 Desc Main

Document Page 33 of 66 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$618.00 6a. 6b. Water, sewer, garbage collection \$200.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$100.00 6c. 6d. Other. Specify: Cable/Internet \$180.00 6d 7. Food and housekeeping supplies 7. \$750.00 8. Childcare and children's education costs \$125.00 8. 9. Clothing, laundry, and dry cleaning \$125.00 9. 10. Personal care products and services \$60.00 10. 11. Medical and dental expenses \$30.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$500.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$40.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$70.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$250.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \_ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$480.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1 D          | <u> eloris Case 16-04583</u>   |                    | Filed 0201151/16            | <u>Entered</u>         | √09,54: <u>16 De</u> | <u>esc Main</u> |            |
|---------------------|--|--------------------|-----------------------------|------------------------|----------------------|-----------------|------------|
| Fi                  | irst Name  | Middle Name        | Documetht ende              | Page 34 of 66          |                      |                 |            |
| 21. <b>Other.</b> S | pecify:  |                    |                             |                        | 21                   | _               | \$0.00     |
|                     |  |                    |                             |                        | _                    |                 |            |
| 22. Calculat        | te your monthly expenses.  |                    |                             |                        |                      |                 | \$4,698.00 |
| 22a. Add            | d lines 4 through 21.  |                    |                             |                        |                      |                 | \$0.00     |
| 22b. Cop            | by line 22 (monthly expenses for                                     | r Debtor 2), if an | y, from Official Form 106J- | -2                     |                      |                 | \$4,698.00 |
| 22c. Add            | l line 22a and 22b. The result is                                    | your monthly ex    | penses.                     |                        | 22.                  |                 |            |
| 23. Calculat        | e your monthly net income.   |                    |                             |                        | <u> </u>             |                 |            |
| 23a. Cop            | by line 12 (your combined month                                      | nly income) from   | Schedule I.                 |                        | 23a                  |                 | \$4,873.00 |
| 23b. Cop            | by your monthly expenses from li                                     | ne 22 above.       |                             |                        | 23b                  |                 | \$4,698.00 |
| 23c. Sub            | tract your monthly expenses from                                     | m your monthly     | income.                     |                        |                      |                 | \$175.00   |
| The                 | e result is your monthly net inco                                    | me.                |                             |                        | 23c                  |                 |            |
| 24. <b>Do you</b>   | expect an increase or decrea   | ase in your exp    | enses within the year aft   | er you file this form? |                      |                 |            |
|                     | ample, do you expect to finish pa<br>ge payment to increase or decre | , , ,              |                             |                        |                      |                 |            |
| <b>✓</b> No         |  |                    |                             |                        |                      |                 |            |
| Yes                 | <b>S</b>   |                    |                             |                        |                      |                 |            |
| _                   | Explain here:  |                    |                             |                        |                      |                 |            |
|                     |  |                    |                             |                        |                      |                 |            |

|                           | Case 16-04583   | Doc 1 Filed 0              | 2/15/16 Ente            | red 02/15/16 09:54:16   | Desc Main  |  |  |
|---------------------------|---|----------------------------|-------------------------|---|--|--|--|
| Fill in this i            | information to identify your case:                          | 1700                       | <i></i>                 | 3/10 09.94.10   | Desc Main  |  |  |
| Debtor 1                  | Deloris   |                            | ONeal                   |   |  |  |  |
| Debtor 2                  | First Name  | Middle Name                | Last Name               |   |  |  |  |
| (Spouse, it               | f filing) First Name  | Middle Name                | Last Name               |   |  |  |  |
| United Sta                | ates Bankruptcy Court for the:                              | Northern                   | District of Illinois    |   |  |  |  |
| Case num                  | ber   |                            | (State)                 |   |  |  |  |
| (If known)                | -15 4005  |                            |                         |   | Check if this is a   |  |  |
| Officia                   | al Form 106Dec  | <u>}</u>                   |                         |   | amended filing   |  |  |
| Decla                     | ration About an   | <b>Individual De</b>       | btor's Sche             | edules  | 12/1   |  |  |
| If two marr               | ried people are filing together,                            | both are equally responsil | ble for supplying cor   | rect information.   |  |  |  |
| property b<br>1519, and 3 | y fraud in connection with a b                              |                            |                         | ), or imprisonment for up to 20 yea   | ing property, or obtaining money or rs, or both. 18 U.S.C. §§ 152, 1341, |  |  |
|                           | ou pay or agree to pay someo                                | ne who is NOT an attorney  | to help you fill out ba | ankruptcy forms?  |  |  |  |
| ✓ No  Yes. Name of person |   |                            |                         | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |
|                           | er penalty of perjury, I declare help are true and correct. | that I have read the summa | ry and schedules file   | d with this declaration and   |  |  |  |
|                           | •   |                            | 40                      |   |  |  |  |
|                           | eloris ONeal<br>ture of Debtor 1                            |                            | <b>★</b> Sigr           | nature of Debtor 2  |  |  |  |
| Date                      | 2/15/2016<br>MM/DD/YYYY                                     |                            | Date                    | MM/DD/YYYY  |  |  |  |

| Fill in this      | Case 16-0458 information to identify your cas                         |                            | ed 02/15/16 I                                       | <u> </u>   | 5/16 09:54:16       | Desc Main  |
|-------------------|---|----------------------------|---|--|---------------------|--|
| Debtor 1          | Deloris   | <u> </u>                   | ONeal   |  |                     |  |
|                   | First Name  | Middle Nam                 | ne Last Nan   | ne   |                     |  |
| Debtor 2 (Spouse, | if filing) First Name   | Middle Nam                 | ne Last Nan   | ne   |                     |  |
| United St         | ates Bankruptcy Court for the:  | Northern                   | District of Illino                                  | ois  |                     |  |
| Case nur          |   |                            | (Sta  |  |                     |  |
| (If known)        |   |                            |   |  |                     | Check if this is ar  |
| Offici            | al Form 107   |                            |   |  |                     | amended filing   |
| State             | ment of Financ  | ial Affairs fo             | or Individua  | ls Filing fo   | r Bankrupt          | <b>Cy</b> 12/15  |
|                   |   |                            |   |  |                     | ring correct information. If more  |
|                   | •   |                            |   |  | ane and case number | i (ii kilowii). Aliswei every question                                   |
| Part 1:           | Give Details About You  | r Marital Status ar        | nd Where You Live                                   | ed Before  |                     |  |
| 1. W              | hat is your current marital st  | atus?                      |   |  |                     |  |
| <u> </u>          | Married Not married   |                            |   |  |                     |  |
| 2. Du             | uring the last 3 years, have yo                                       | u lived anywhere othe      | er than where you live r                            | now?   |                     |  |
|                   | No  |                            |   |  |                     |  |
| √                 | INO   |                            |   |  |                     |  |
|                   | Yes. List all of the places you                                       | lived in the last 3 years. | Do not include where yo                             | u live now.  |                     |  |
| Ľ                 | Yes. List all of the places you                                       |                            | ·   |  |                     |  |
|                   |   |                            | Do not include where you  Dates Debtor 1 lived here | u live now.  Debtor 2:                                     |                     | Dates Debtor 2 lived there   |
| Ĕ                 | Yes. List all of the places you                                       |                            | Dates Debtor 1 lived                                |  | or 1                |  |
| Ĕ                 | Yes. List all of the places you  Debtor 1:                            | E<br>tl                    | Dates Debtor 1 lived                                | Debtor 2:  Same as Debt                                    | or 1                | there  |
|                   | Yes. List all of the places you                                       | tl                         | Dates Debtor 1 lived here                           | Debtor 2:  | or 1                | there  Same as Debtor 1  |
|                   | Yes. List all of the places you  Debtor 1:  Number Street             | - tl                       | Dates Debtor 1 lived here                           | Debtor 2:  Same as Debtor 2:  Number Street                |                     | there  Same as Debtor 1  From To   |
|                   | Yes. List all of the places you  Debtor 1:                            | tl                         | Dates Debtor 1 lived here                           | Debtor 2:  Same as Debtor Street  City                     | State Zip C         | there  Same as Debtor 1  From To ode                                     |
|                   | Yes. List all of the places you  Debtor 1:  Number Street             | - tl                       | Dates Debtor 1 lived here                           | Debtor 2:  Same as Debtor 2:  Number Street                | State Zip C         | there  Same as Debtor 1  From To   |
| Z Z               | Yes. List all of the places you  Debtor 1:  Number Street             | E tl                       | Dates Debtor 1 lived here                           | Debtor 2:  Same as Debtor Street  City                     | State Zip C         | there  Same as Debtor 1  From To ode                                     |
| Y C               | Yes. List all of the places you  Debtor 1:  Number Street  City State | E tt Zip Code              | Pates Debtor 1 lived here                           | Debtor 2:  Same as Debi  Number Street  City  Same as Debi | State Zip C         | there  Same as Debtor 1  From To  Ode  Same as Debtor 1                  |
| Y C               | Yes. List all of the places you  Debtor 1:  Number Street  City State | E tt Zip Code              | Pates Debtor 1 lived here                           | Debtor 2:  Same as Debi  Number Street  City  Same as Debi | State Zip C         | there  Same as Debtor 1  From To  ode  Same as Debtor 1  From To  To  To |

Doc 1 Debtor 1 Deloris Case 16-04583

First Name

| Part      | Explain the Sources of Your Income  |  |  |   |  |  |  |  |  |
|-----------|---|--|--|---|--|--|--|--|--|
|           | Fill in the total amount of income you received to  | from all jobs and all businesses   | from operating a business during this year or the two previous calendar years? all jobs and all businesses, including part-time ncome that you receive together, list it only once under Debtor 1. |   |  |  |  |  |  |
|           |   | Debtor 1   |  | Debtor 2  |  |  |  |  |  |
|           |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.                | Gross income<br>(before deductions and<br>exclusions)            |  |  |  |  |
|           | From January 1 of current year until the date you filed for bankruptcy:   | Wages, commissions, bonuses, tips Operating a business   |  | Wages, commissions, bonuses, tips Operating a business    |  |  |  |  |  |
|           | For last calendar year: (January 1 to December 31,  | Wages, commissions, bonuses, tips Operating a business   |  | Wages, commissions, bonuses, tips Operating a business    |  |  |  |  |  |
|           | For the calendar year before that: (January 1 to December 31,   | Wages, commissions, bonuses, tips Operating a business   |  | ☐ Wages, commissions, bonuses, tips☐ Operating a business |  |  |  |  |  |
| <br> <br> | Did you receive any other income during this include income regardless of whether that incomponential payments; pensions; rental income; interpand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details. | ne is taxable. Examples of other<br>est; dividends; money collected<br>list it only once under Debtor 1. | income are alimony; child so<br>from lawsuits; royalties; and  | gambling and lottery winnings.                            |  |  |  |  |  |
|           |   | Debtor 1   |  | Debtor 2  |  |  |  |  |  |
|           |   | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions)   | Sources of income<br>Describe below.                      | Gross income from each source (before deductions and exclusions) |  |  |  |  |
|           | From January 1 of current year until the date you filed for bankruptcy:   |  |  |   |  |  |  |  |  |
|           | For last calendar year: (January 1 to December 31, 2015 ) YYYY  |  | \$9,276.00   | Husband's SSI and<br>Pension                              | \$42,000.00  |  |  |  |  |
|           | For the calendar year before that: (January 1 to December 31,   |  | \$9,276.00   | Husbands SSI and<br>Pension                               | \$42,000.00  |  |  |  |  |

Debtor 1 Deloris Case 16-04583 Doc 1 Filed 02615/16 Entered 02/415/16 (09:54:16 Desc Main

rst Name Document Page 38 of 66

List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code

Other

Deloris Case 16-04583 Doc 1 Filed 02615/16 Entered 02/15/16 09:54:16 Desc Main Debtor 1 Document Page 39 of 66 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Deloris Case 16-04583 First Name Filed 02615/16 Entered 02/175/16/09:54:16 Desc Main Doc 1

Document Page 40 of 66

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

|     | such matters, includ                                    | filed for bankruptcy, wing personal injury cases |          |                     |                    |        |          | tody modifications, | and contract |
|-----|---|--|----------|---------------------|--------------------|--------|----------|---------------------|--------------|
| ✓ N | lo<br>es. Fill in the details.                          |  |          |                     |                    |        |          |                     |              |
|     |   |  | Nature o | of the case         | Court or age       | ncy    |          | Status of the ca    | se           |
|     | Case title  |  |          |                     |                    |        |          | Pending             |              |
|     |   |  |          |                     | Court Name         |        |          | On appeal           |              |
|     | Case number   |  |          |                     | Number Stree       | t      |          | Concluded           |              |
|     |   |  |          |                     | City               | State  | Zip Code | •                   |              |
|     | Case title  |  |          |                     |                    |        |          | Pending             |              |
|     |   |  |          |                     | Court Name         |        |          | · <b>=</b>          |              |
|     | Case number   |  |          |                     | Courtivanie        |        |          | On appeal           |              |
|     |   |  |          |                     | Number Stree       | t      |          | Concluded           |              |
|     |   |  |          |                     | City               | State  | Zip Code | •                   |              |
| ä   | Yes. Fill in the inform  Creditor's Name  Number Street | ation below.                                     |          | Describe the proper |                    |        | Date     | Value of t property | he           |
|     |   |  |          | Property was repo   | ossessed.          |        |          |                     |              |
|     |   |  |          | Property was fore   |                    |        |          |                     |              |
|     |   |  |          | Property was gar    |                    |        |          |                     |              |
|     | City  | State Zip Co                                     | ode      | Property was atta   | ched, seized, or l | evied. |          |                     |              |
|     |   |  |          | Describe the proper | ty                 |        | Date     | Value of t property | he           |
|     |   |  |          |                     |                    |        |          |                     |              |
|     | Creditor's Name   |  |          |                     |                    |        |          |                     |              |
|     | Number Street   |  |          | Explain what happe  | ned                |        |          |                     |              |
|     | number Street   |  |          | Property was repo   | necessed           |        |          |                     |              |
|     |   |  |          | Property was fore   |                    |        |          |                     |              |
|     |   |  |          | Property was gar    |                    |        |          |                     |              |
|     | City  | State Zip Co                                     | ode      | Property was atta   |                    | evied. |          |                     |              |
|     | ,   | p 0  |          | _ · ′               | •                  |        |          |                     |              |

| Deb  | tor 1    | Deloris Case 16-04583<br>First Name                                     |                        | <u>ପ 02ର୍ଜାର/16 Entered</u> 02/45ର/16 /09:5<br>cumente Page 41 of 66 | 4: <u>16 Desc</u>        | Main                     |
|------|----------|---|------------------------|--|--------------------------|--------------------------|
| 11.  |          | nin 90 days before you filed fo<br>ounts or refuse to make a payr<br>No |                        | creditor, including a bank or financial institution, set             | off any amounts fi       | rom your                 |
|      | Ħ        | Yes. Fill in the details.   |                        |  |                          |                          |
|      | _        |   |                        | Describe the action the creditor took                                | Date action was taken    | Amount                   |
|      |          | Creditor's Name   |                        |  |                          |                          |
|      |          |   |                        |  |                          |                          |
|      |          | Number Street   |                        | Look 4 digits of account guest on VVVV                               |                          |                          |
|      |          |   |                        | Last 4 digits of account number: XXXX-                               |                          |                          |
|      |          | City State  | Zip Code               |  |                          |                          |
| 12.  |          | iin 1 year before you filed for k<br>iver, a custodian, or another c    |                        | your property in the possession of an assignee for                   | the benefit of cred      | itors, a court-appointed |
|      | <u>~</u> | No  |                        |  |                          |                          |
|      | <u>Ц</u> | Yes   |                        |  |                          |                          |
| Part | 5:       | List Certain Gifts and Co   | ontributions           |  |                          |                          |
| 13.  | Wit      | thin 2 years before you filed fo  | or bankruptcy, did you | give any gifts with a total value of more than \$600 pe              | r person?                |                          |
|      | <b>✓</b> | No  |                        |  |                          |                          |
|      |          | Yes. Fill in the details for each                                       | gift.                  |  |                          |                          |
|      |          | Gifts with a total value of mo per person                               | ere than \$600         | Describe the gifts   | Dates you gave the gifts | Value                    |
|      |          | Person to Whom You Gave the 0   | Cift                   |  |                          |                          |
|      |          |   |                        |  |                          |                          |
|      |          |   |                        |  |                          |                          |
|      |          | Number Street   |                        |  |                          |                          |
|      |          | City State  | Zip Code               |  |                          |                          |
|      |          | Person's relationship to you  |                        |  |                          |                          |
|      |          | Person to Whom You Gave the 0   | Gift                   |  |                          |                          |
|      |          |   |                        |  |                          |                          |
|      |          | Number Street   |                        |  |                          |                          |
|      |          | City State  | Zip Code               |  |                          |                          |
|      |          | Person's relationship to you  |                        |  |                          |                          |
|      |          |   |                        |  |                          |                          |

|      |              | Distribute | ocument Page 42 of 66   |                          |                                       |
|------|--------------|---|---|--------------------------|---------------------------------------|
| 14.  | With         |   | give any gifts or contributions with a total value of mor     | e than \$600 to an       | y charity?                            |
|      |              | No Yes. Fill in the details for each gift or contribution.  |   |                          |                                       |
|      |              | Gifts with a total value of more than \$600 per person  | Describe the gifts  | Dates you gave the gifts | Value                                 |
|      |              |   |   |                          |                                       |
|      |              | Charity's Name  |   |                          |                                       |
|      |              | Niverban Otrost   |   |                          |                                       |
|      |              | Number Street   |   |                          |                                       |
|      |              | City State Zip Code   |   |                          |                                       |
| Part |              | List Certain Losses   |   |                          | -                                     |
| 15.  |              | in 1 year before you filed for bankruptcy or since y<br>bling?  | ou filed for bankruptcy, did you lose anything because        | of theft, fire, othe     | r disaster, or                        |
|      | V            | No  |   |                          |                                       |
|      | Ц            | Yes. Fill in the details.  Describe the property you lost and   | Describe any insurance coverage for the loss                  | Date of your             | Value of property lost                |
|      |              | how the loss occurred   | Include the amount that insurance has paid. List pending      | loss                     | , , , , , , , , , , , , , , , , , , , |
|      |              |   | insurance claims on line 33 of Schedule A/B: Property.        |                          |                                       |
|      |              |   |   |                          |                                       |
| Part | 7:           | List Certain Payments or Transfers  |   |                          |                                       |
| 16.  |              | in 1 year before you filed for bankruptcy, did you or<br>ing bankruptcy or preparing a bankruptcy petition?   | r anyone else acting on your behalf pay or transfer any p     | property to anyon        | e you consulted about                 |
|      |              |   | t counseling agencies for services required in your bankrupto | су.                      |                                       |
|      |              | No<br>Yes. Fill in the details.   |   |                          |                                       |
|      | lacktriangle | res. I ili ili ule details.   | Description and value of any property transferred             | Date payment             | Amount of payment                     |
|      |              |   | bescription and value of any property transferred             | or transfer<br>was made  | Amount of payment                     |
|      |              | The Semrad Law Firm   | Semrad Law Firm - \$400.00                                    | 2/11/2016                | \$400.00                              |
|      |              | Person Who Was Paid<br>20 S. Clark # 28   |   |                          |                                       |
|      |              | Number Street   |   |                          |                                       |
|      |              |   |   |                          |                                       |
|      |              | Chicago Illinois 60603  |   |                          |                                       |
|      |              | City State Zip Code   |   |                          |                                       |
|      |              | Email or website address  |   |                          |                                       |
|      |              | Person Who Made the Payment, if Not You   |   | <u> </u><br>             |                                       |
|      |              | Person Who Was Paid   |   |                          |                                       |
|      |              | Number Street   |   |                          |                                       |
|      |              |   |   |                          |                                       |
|      |              | City State Zip Code   |   |                          |                                       |
|      |              | Email or website address  |   |                          |                                       |
|      |              | Person Who Made the Payment, if Not You   |   |                          |                                       |

Filed 02615/16 Entered 02/15/16/09:54:16 Desc Main

|                 | erson Who Was Paid umber Street  ty State Zip Code  |   |                      | or transfer<br>was made              |           |               |
|-----------------|---|---|----------------------|--------------------------------------|-----------|---------------|
| Nui City        | imber Street  |   |                      |                                      |           |               |
| City            |   | <del>-</del>                                      |                      |                                      |           |               |
| Vithin 2        | ty State Zip Code   |   |                      |                                      |           |               |
|                 |   |   |                      |                                      |           |               |
| ansfers         | ooth outright transfers and transfers made as se<br>that you have already listed on this statement.<br>Fill in the details. |   | erest or mortgage or | your property). Do                   | not inclu | ide gifts and |
|                 |   | Description and value of any property transferred |                      | property or paymets paid in exchange |           | Date trans    |
| Per             | erson Who Received Transfer   |   |                      |                                      |           |               |
| Nur             | imber Street  |   |                      |                                      |           |               |
| City<br>Per     | ty State Zip Code<br>erson's relationship to you  |   |                      |                                      |           |               |
| Per             | erson Who Received Transfer   |   |                      |                                      |           |               |
| Nur             | imber Street  |   |                      |                                      |           |               |
| City<br>Per     | ty State Zip Code<br>rrson's relationship to you  |   |                      |                                      |           |               |
| Γhese a<br>☑ No | 10 years before you filed for bankruptcy, did are often called asset-protection devices.)                                   | you transfer any property to a self-settle        | d trust or similar d | evice of which yo                    | u are a b | eneficiary?   |
| Yes.            | s. Fill in the details.   | Description and value of the prop                 | erty transferred     |                                      |           | Date transf   |

Filed 02615/16 Entered 02/15/16/09:54:16 Desc Main

Debtor 1 Deloris Case 16-04583 First Name Filed 02615/16 Entered 02/4/5/16 09:54:16

Document Page 44 of 66 Doc 1

| Desc |  |  |
|------|--|--|
|      |  |  |

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

|     | <ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.</li> </ul> |  |              |                      |                 |                            |   |   |
|-----|---|--|--------------|----------------------|-----------------|----------------------------|---|---|
|     |   | No<br>Yes. Fill in the details.                      |              |                      |                 |                            |   |   |
|     | _   |  | Last 4       | digits of account    | Type of instrum | account or<br>nent         | Date account<br>was closed,<br>sold, moved,<br>or transferred | Last balance<br>before closing<br>or transfer |
|     |   | Person Who Was Paid                                  | XXXX         | -                    |                 | ecking<br>vings            |   |   |
|     |   | Number Street  |              |                      |                 | ney market<br>kerage<br>er |   |   |
|     |   | City State Zip Code                                  |              |                      |                 |                            |   |   |
|     |   | Person Who Was Paid                                  | XXXX         | -                    |                 | ecking<br>vings            |   |   |
|     |   | Number Street  |              |                      | Bro             | ney market<br>kerage       |   |   |
|     |   | City State Zip Code                                  |              |                      | U Oth           | er                         |   |   |
|     | valua   | ou now have, or did you have within 1 year befables? | ore you file | d for bankruptcy, ar | ny safe deposi  | t box or other depositor   | ry for securities,  | cash, or other                                |
|     |   | Yes. Fill in the details.                            | Who else     | had access to it?    |                 | Describe the contents      | S   | Do you still have it?                         |
|     |   | Name of Financial Institution                        | Name         |                      |                 |                            |   | ☐ No ☐ Yes                                    |
|     |   | Number Street  | Number       | Street               |                 |                            |   | III les                                       |
|     |   | City State Zip Code                                  | City         | State                | Zip Code        |                            |   |   |
| 22. | Have  | e you stored property in a storage unit or place     | other than   | your home within 1   | year before y   | ou filed for bankruptcy    | ?   |   |
|     |   | No<br>Yes. Fill in the details.                      |              |                      |                 |                            |   |   |
|     |   |  | Who else     | had access to it?    |                 | Describe the contents      | <b>S</b>  | Do you still have it?                         |
|     |   | Name of Storage Facility                             | Name         |                      |                 |                            |   | ☐ No<br>☐ Yes                                 |
|     |   | Number Street  | Number       | Street               |                 |                            |   | _ <del></del>                                 |
|     |   |  | City         | State                | Zip Code        |                            |   |   |
|     |   | City State Zip Code                                  |              |                      |                 |                            |   |   |

| Deb  | otor 1   | Deloris Case 16-04583 Doc 1 First Name Middle Name   | Filed 0200        | <u>ll5/16 Er</u><br>≝rYt <sup>me</sup> Paç | ntered            | . <b>5/1.6</b> ⁄09:54: <u>16 Desc Mai</u>  | <u>n</u>        |
|------|----------|--|-------------------|--|-------------------|--|-----------------|
| Part | 9:       | Identify Property You Hold or Contro   | I for Some        | ne Else                                    |                   |  |                 |
| 23.  | Do y     | you hold or control any property that someone No Yes. Fill in the details.   | e else owns? I    | nclude any pro                             | perty you borro   | owed from, are storing for, or hold in tru | st for someone. |
|      | Ц        | res. Fill in the details.  | Where is th       | e property?                                |                   | Describe the contents                      | Value           |
|      |          | Owner's Name   | Number Stre       | eet  |                   | -  |                 |
|      |          | Number Street  |                   |  |                   | _  |                 |
|      |          | Number Street  | _                 |  |                   |  |                 |
|      |          |  | City              | State                                      | Zip Code          |  |                 |
|      |          | City State Zip Code  | _                 |  |                   |  |                 |
| Par  | t 10:    | Give Details About Environmental In  | nformation        |  |                   |  |                 |
| For  | the p    | urpose of Part 10, the following definitions apply:  |                   |  |                   |  |                 |
|      | ha       | nvironmental law means any federal, state, or loca<br>azardous or toxic substances, wastes, or material in<br>cluding statutes or regulations controlling the clea | nto the air, land | , soil, surface wa                         | ater, groundwater |  |                 |
|      |          | ite means any location, facility, or property as define<br>used to own, operate, or utilize it, including dispo  | •                 | vironmental law,                           | whether you now   | own, operate, or utilize it                |                 |
|      |          | azardous material means anything an environment xic substance, hazardous material, pollutant, conta  |                   |  | aste, hazardous s | substance,                                 |                 |
| Rep  | oort al  | I notices, releases, and proceedings that you know   | v about, regardle | ess of when they                           | occurred.         |  |                 |
| 24   | Has      | any governmental unit notified you that you r  | may be liable o   | or notentially lia                         | able under or in  | violation of an environmental law?         |                 |
|      | <b>I</b> | No   | may be mable t    | n potomically in                           |                   | violation of an official canal             |                 |
|      |          | Yes. Fill in the details.  |                   |  |                   |  |                 |
|      |          |  | Governmen         | ntal unit                                  |                   | Environmental law, if you know it          | Date of notice  |
|      |          | Name of site   | Government        | al unit                                    |                   | -  |                 |
|      |          | Number Street  | Number Stre       | eet  |                   | _  |                 |
|      |          |  | City              | State                                      | Zip Code          | -  |                 |
|      |          | City State Zip Code  | _                 |  |                   |  |                 |
| 25.  | Hav      | e you notified any governmental unit of any re   | elease of hazar   | rdous material                             | ?                 |  |                 |
|      | <b>V</b> | No   |                   |  |                   |  |                 |
|      |          | Yes. Fill in the details.  |                   |  |                   |  |                 |
|      |          |  | Governmen         | ntal unit                                  |                   | Environmental law, if you know it          | Date of notice  |
|      |          | Name of site   | Government        | al unit                                    |                   | -  |                 |
|      |          | Number Street  | Number Stre       | eet  |                   | _  |                 |
|      |          |  | City              | State                                      | Zip Code          | -  |                 |
|      |          | City State Zip Code  | _                 |  |                   |  |                 |
|      |          |  |                   |  |                   |  |                 |

| Debtor   | 1     | Deloris Case 16-04583<br>First Name   | Doc 1 F             |                             | <u>Entered</u>      | %16.09.54: <u>16 Desc Ma</u>                             | ain             |
|----------|-------|---|---------------------|-----------------------------|---------------------|--|-----------------|
| 26. H    | av    | e you been a party in any judic   | ial or administrati | ive proceeding under an     | y environmental law | ? Include settlements and orders.                        |                 |
| <u> </u> | 7     | No  |                     |                             |                     |  |                 |
|          | 1     | Yes. Fill in the details.   |                     | Court or agency             |                     | Nature of the case                                       | Status of the   |
|          |       |   |                     | Court or agency             |                     | Nature of the case                                       | case            |
|          |       | Case title  |                     |                             |                     |  | Pending         |
|          |       |   |                     | Court Name                  |                     |  | On appeal       |
|          |       |   |                     | Number Street               |                     |  | Concluded       |
|          |       | Case number   |                     | City State                  | Zip Code            |  |                 |
| Part 11  | :     | Give Details About Your   | Business or C       | Connections to Any          | Business            |  |                 |
|          |       |   |                     |                             |                     | ing connections to any business?                         |                 |
| 27. W    | , iti | _   |                     |                             | •                   |  |                 |
|          |       | A sole proprietor or self-emp  A member of a limited liabilit   |                     | •                           | •                   | -time  |                 |
|          |       | A partner in a partnership  | , , , ,             | • •                         | , ,                 |  |                 |
|          |       | An officer, director, or managed An owner of at least 5% of the state |                     |                             |                     |  |                 |
| _        | 7     | _   |                     | securities of a corporation |                     |  |                 |
| Ľ        | =     | No. None of the above applies. G<br>Yes. Check all that apply above a   |                     | below for each business.    |                     |  |                 |
|          |       |   |                     | Describe the natur          | e of the business   | Employer Identification n                                |                 |
|          |       |   |                     |                             |                     | include Social Security nu                               | imper or II in. |
|          |       | Business Name   |                     |                             |                     | LIIV.  |                 |
|          |       | Number Street   |                     | Name of accounta            | nt or bookkooner    | Dates business existed                                   |                 |
|          |       | City State  | Zip Code            | — Name of accounta          | III OI DOOKKeepei   | From To  |                 |
|          |       | City State  | Zip Code            |                             |                     |  |                 |
|          |       |   |                     |                             |                     |  |                 |
|          |       |   |                     | Describe the natur          | e of the business   | Employer Identification no<br>include Social Security nu |                 |
|          |       | Business Name   |                     |                             |                     | EIN:   |                 |
|          |       |   |                     |                             |                     |  |                 |
|          |       | Number Street   |                     | Name of accounta            | nt or bookkeeper    | Dates business existed                                   |                 |
|          |       | City State  | Zip Code            |                             |                     | From To  |                 |
|          |       |   |                     |                             |                     |  |                 |
|          |       |   |                     | Describe the natur          | e of the business   | Employer Identification n                                |                 |
|          |       |   |                     |                             |                     | include Social Security nu                               | ımber or ITIN.  |
|          |       | Business Name   |                     |                             |                     | EIN:   |                 |
|          |       | Number Street   |                     |                             |                     | Dates business existed                                   |                 |
|          |       |   |                     | Name of accounta            | nt or bookkeeper    |  |                 |
|          |       | City State  | Zip Code            |                             |                     | FromTo   | <u></u>         |
|          |       |   |                     |                             |                     |  |                 |
|          |       |   |                     |                             |                     |  |                 |

| Debto | r 1   | Deloris Ca      | <u>se 16-0</u>             | <u> 4583</u> | Doc 1          |            | 020115/16         |            |                                    | h16a09;54: <u>1</u>                                      | .6 I    | <u>Desc</u> | <u>: Main</u> |               | _ |
|-------|-------|-----------------|----------------------------|--------------|----------------|------------|-------------------|------------|------------------------------------|--|---------|-------------|---------------|---------------|---|
|       |       | First Name      |                            |              | Middle Name    | Do         | cumente           | Page       | 47 of 66                           |  |         |             |               |               |   |
|       |       | •               | before you<br>her parties. |              | ankruptcy, d   | id you gi  | ve a financial st | atement    | to anyone abou                     | t your business  | ? Inclu | ide all     | financial     | institutions, |   |
| إ     |       | No              | 1.49.1                     |              |                |            |                   |            |                                    |  |         |             |               |               |   |
| Į.    | _     | Yes. Fill in th | ne details be              | elow.        |                |            |                   |            |                                    |  |         |             |               |               |   |
|       |       |                 |                            |              |                |            | Date issued       |            |                                    |  |         |             |               |               |   |
|       |       | Name            |                            |              |                |            | MM/DD/YYYY        |            |                                    |  |         |             |               |               |   |
|       |       | Number          | Street                     |              |                |            |                   |            |                                    |  |         |             |               |               |   |
|       |       | City            | ;                          | State        | Zip Coo        | de         |                   |            |                                    |  |         |             |               |               |   |
|       |       | Sign Bel        |                            |              |                |            |                   |            |                                    |  |         |             |               |               |   |
| ar    | nd c  | orrect. I un    | derstand ti<br>can result  | nat makin    | g a false stat | ement, c   | oncealing prop    | erty, or o | btaining money<br>ars, or both. 18 | under penalty o<br>or property by 1<br>U.S.C. §§ 152, 13 | raud ir | conn        | ection wi     |               |   |
|       |       |                 | Signature                  | of Debtor 1  |                |            |                   |            | Signature                          | of Debtor 2  |         |             |               |               |   |
|       |       |                 | Date 2/15                  | 5/2016       |                |            |                   |            | Date 2/1                           | 5/2016   |         |             |               |               |   |
| Di    | id yo | ou attach a     | dditional p                | ages to Yo   | our Statemer   | nt of Fina | ancial Affairs fo | r Individ  | uals Filing for B                  | ankruptcy (Offic   | ial For | m 107       | )?            |               |   |
| V     | N     | lo              |                            |              |                |            |                   |            |                                    |  |         |             |               |               |   |
| Ē     | =     |                 |                            |              |                |            |                   |            |                                    |  |         |             |               |               |   |
|       | _ Y   | 'es             |                            |              |                |            |                   |            |                                    |  |         |             |               |               |   |
| Di    | _     |                 | gree to pay                | someone      | who is not a   | an attorn  | ey to help you f  | ill out ba | nkruptcy forms                     | ?  |         |             |               |               |   |
| Di    | id yo |                 | gree to pay                | someone      | e who is not a | an attorn  | ey to help you f  | ill out ba | nkruptcy forms                     | ?  |         |             |               |               |   |
| Di    | id yo | ou pay or a     |                            | someone      | e who is not a | an attorn  | ey to help you f  | ill out ba | Attach th                          | ?<br>ne Bankruptcy Pe<br>tion, and Signatur              |         | •           |               |               |   |

### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

| Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:   | n re | Deloris ONeal ;   |   | Case No.             |                                |
|---|------|---|---|----------------------|--------------------------------|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  1. Pursuents to 11 U.S.C. § 236(s) and Fed. Banks. P. 2016(s), Lostify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me will year before the filing of the petition in bankruptor, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplat in connection with the bankruptory case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:  Debtor  Other (specify)  3. The source of the compensation paid to me is:  Debtor  Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my lew firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my lew firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee. I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required:  c. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  Balance Due to the debtor of Altomey  Semiral Law Firm |      | Debtor  |   |                      | (If known)                     |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me with year before the filing of the petition in bankruptcy, or a greed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplate in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:    Obetor  |      |   |   | Chapter              | Chapter 13                     |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me with year before the filing of the petition in bankruptcy, or a greed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplate in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:    Obetor  |      |   |   |                      |                                |
| year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplat in connection with the bankruptcy cases is as follows:  For legal services. I have agreed to accept Prior to the filing of this statement I have received Balance Due  2. The source of the compensation paid to me was:  Debtor Other (specify)  3. The source of the compensation paid to me is: Debtor Other (specify)  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditions and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  Signature of Attorney  Semiad Law Firm  |      | DISCLOSURE OF   | COMPENSATION OF ATTORN                                  | NEY FOR D            | EBTOR                          |
| Prior to the filing of this statement I have received  Balance Due  2. The source of the compensation paid to me was:   | 1.   | year before the filing of the petition in bankruptcy, or                              | agreed to be paid to me, for services rendered or to be |                      |                                |
| 2. The source of the compensation paid to me was:    Other (specify)  |      | For legal services, I have agreed to accept   |   |                      | \$4,000.00                     |
| 2. The source of the compensation paid to me was:    Jobotor  |      | Prior to the filing of this statement I have received                                 |   |                      | \$400.00                       |
| 3. The source of the compensation paid to me is:    Other (specify)   |      | Balance Due   |   |                      | \$3,600.00                     |
| A. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  // Marcie Venturini  Date  Signature of Attorney  Semirad Law Firm  | 2.   |   | Other (specify)   |                      |                                |
| members and associates of my law firm.  I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  //s/ Marcie Venturini  Date  Signature of Attorney  Semrad Law Firm  | 3.   |   | Other (specify)   |                      |                                |
| members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  // Marcie Venturini  Date  Signature of Attorney  Semrad Law Firm   | 4.   | I have not agreed to share the above-disclosed members and associates of my law firm. | compensation with any other person unless they are      |                      |                                |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  //s/ Marcie Venturini  Date  Signature of Attorney  Semrad Law Firm   |      | members or associates of my law firm. A copy  | if the agreement, together with a list of the names of  | t                    |                                |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  /s/ Marcie Venturini  Date  Signature of Attorney  Semrad Law Firm   | 5.   |   |   |                      | n in bankruptcy;               |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  // Marcie Venturini  Date  Signature of Attorney  Semrad Law Firm   |      | b. Preparation and filing of any petition, sched                                      | ules, statements of affairs and plan which may be req   | uired;               |                                |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  Date  Semrad Law Firm   |      | c. Representation of the debtor at the meeting  | of creditors and confirmation hearing, and any adjou    | rned hearings there  | eof;                           |
| CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.    2/15/2016  |      | d. Representation of the debtor in adversary p  | roceedings and other contested bankruptcy matters;      |                      |                                |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.  2/15/2016  Date  /s/ Marcie Venturini  Signature of Attorney  Semrad Law Firm   | 6.   | By agreement with the debtor(s), the above-disclose                                   | d fee does not include the following services:          |                      |                                |
| proceedings.  2/15/2016 Date /s/ Marcie Venturini Signature of Attorney Semrad Law Firm   |      |   | CERTIFICATION   |                      |                                |
| Date Signature of Attorney  Semrad Law Firm   |      | , , ,   | ny agreement or arrangement for payment to me for r     | epresentation of the | e debtor(s) in this bankruptcy |
| Semrad Law Firm   |      | 2/15/2016   | /s/ Marcie V  | enturini             |                                |
|   |      | Date  | Signature of  | Attorney             |                                |
|   |      |   | Semrad La   | w Firm               |                                |
| Name of law firm  |      |   | Name of la  | w firm               |                                |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 400.00 toward the flat fee, leaving a balance due of \$ 3600.00 ; and \$ 77.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 02/11/16 |                            |
|----------------|----------------------------|
| Signed:        |                            |
| X felois Okeal |                            |
| Deloris ONeal  | Cartley Solf               |
| Debtor(s)      | Attorney for the Debtor(s) |

Do not sign this agreement if the amounts are blank.

00/11/10

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### Chapter 7: Liquidation

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

#### Case 16-04583 Doc 1 Filed 02/15/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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Page 56 of 66 your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

> If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$310 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$235 | filing fee         |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Main UNITED STATES BANKBURGOURT Northern District of Illinois

| In re: | ONeal, Deloris;                          | Case No                                      |  |
|--------|--|--|--|
| _      | Debtor(s)                                |  |  |
|        |  | Chapter.                                     | Chapter13                                |
|        | VERIFIC                                  | ATION OF CREDITOR MATE                       | RIX                                      |
|        | The above named Debtors hereby verify th | at the attached list of creditors is true an | d correct to the best of their knowledge |
|        |  |  |  |
| Date:  | 2/15/2016                                | /s/ ONeal, Deloris                           |  |
| -      |  | ONeal, Deloris                               |  |
|        |  | Signature of Debtor                          |  |
|        |  |  |  |
|        |  | /s/  |  |
|        |  | Signature of Joint De                        | ebtor                                    |

Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Main Document Page 60 of 66

Santander Consumer USA PO Box 961245 Fort Worth , TX 76161

WESTLAKE FIN 4751 WILSHIRE BVLD SUITE 100 LOS ANGELES , CA 90010

STELLAR RECOVERY INC 4500 Salisbury Rd Ste 10 Jacksonville , FL 32216

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS , NV 89193

COMENITY BANK/ASHSTWRT PO BOX Columbus , OH 43218

CARRINGTON MORTGAGE SE 1600 S DOUGLASS RD STE 2 ANAHEIM , CA 92806

City of Chicago Water Department 333 S State, Suite 300 Chicago , IL 60604

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

Check N Go - Western 6311 S Western Ave Chicago , IL 60636

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace, IL 60181

PEOPLES GAS 130 E. RANDOLPH DRIVE CHICAGO , IL 60601

| Debtor 1 Deloris Case 16  | 6-04583 Doc 1 Filed 02<br>Middle Name Docum   | 2/15/16 Entered 02/15/16<br>ONE Page 61 of 66  | 6 09:54:16 Desc Main   |
|---|---|--|--|
|   | uestions for Reporting Purpose  | . •  |  |
| 16. What kind of debts<br>do you have?  | 16a. Are your debts primarily as "incurred by an individed No. Go to line 16b.  ✓ Yes. Go to line 17.  16b. Are your debts primarily obtain money for a busine investment.  ✓ No. Go to line 16c.  ✓ Yes. Go to line 17.                                  |  | ets are debts that you incurred to operation of the business or  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availab<br>No.<br>Yes.  |  | erty is excluded and administrative expenses are   |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | Notice of the Control |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion  |
| Part 7: Sign Below  |   |  |  |
| For you   | and correct.  If I have chosen to file under Chor 13 of title 11, United States Coproceed under Chapter 7.  If no attorney represents me and fill out this document, I have obtain I request relief in accordance with I understand making a false state. | napter 7, I am aware that I may produce. I understand the relief available I did not pay or agree to pay so ained and read the notice require the the chapter of title 11, United Sement, concealing property, or of se can result in fines up to \$250, 1519, and 3571. | roceed, if eligible, under Chapter 7, 11,12, able under each chapter, and I choose to meone who is not an attorney to help me d by 11 U.S.C. § 342(b). States Code, specified in this petition. Otaining money or property by fraud in 000, or imprisonment for up to 20 years, ure of Debtor 2  |
| · · · · · · · · · · · · · · · · · · ·   | MM / DD /   |  | MM / DD / YYYY  NAME AND A STATE OF THE STAT |

Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Main Fill in this information to identify your case: Debtor 1 Deloris **ONeal** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Illinois Northern (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? V No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Signature of Debtor 2

MM/DD/YYYY

Date

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

that they are true and correct.

MM/DD/YYYY

/s/ Deloris ONeal
Signature of Debtor 1

Date 2/11/2016

| tor 1 E                                    | Cas  | se 16-04583   | Doc 1  | Filed 02/15/16   | Entered 02/15/16 09:54:16  Page 63 of 66   | Desc Main  |
|--|--|---|--|--|--|--|
| _  | First Name   |   | Middle Name  | Documente Documente  | Page 63-01 66  | and the state of t |
|  | in 2 years bet<br>tors, or other                             |   | ankruptcy, dic   | d you give a financial sta   | tement to anyone about your business? Ind  | clude all financial institutions   |
| L.   | No<br>(es. Fill in the                                       | details below.  |  |  |  |  |
|  |  |   |  | Date issued  |  |  |
| i  | Name   |   |  | MM/DD/YYYY   |  |  |
| ī  | Number Str   | eet   | ······································                                     | <del></del>  |  |  |
|  |  |   |  |  |  |  |
|  | City   | State   | Zip Code   | e  |  |  |
| 2: S                                       | rrect. I unde  | wers on this <i>Stater</i><br>stand that making   | a false state  | ncial Affairs and any atta<br>ment, concealing prope   | chments, and I declare under penalty of per<br>ty, or obtaining money or property by fraud<br>o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1                                     | in connection with a   |
| 2: S<br>nave r                             | Sign Below<br>read the answerrect. I under<br>opticy case ca | v<br>wers on this <i>Stater</i><br>rstand that making   | nent of Finan<br>a false state<br>to \$250,000,                            | ncial Affairs and any attament, concealing proper<br>or imprisonment for up t  | ty, or obtaining money or property by fraud  | in connection with a   |
| 2: S                                       | Sign Below<br>read the answerrect. I under<br>opticy case ca | wers on this <i>Stater</i> stand that making n result in fines up   | nent of Finan<br>a false state<br>to \$250,000,                            | ncial Affairs and any attament, concealing proper<br>or imprisonment for up t  | rty, or obtaining money or property by fraud<br>o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1   | in connection with a   |
| nave r<br>nd cor<br>ankru                  | read the answerect. I under uptcy case ca                    | wers on this Stater<br>rstand that making<br>n result in fines up<br>/s/ Deloris ONeal<br>gnature of Debtor 1                       | nent of Finan<br>a false state<br>to \$250,000,                            | ncial Affairs and any atta<br>ment, concealing prope<br>or imprisonment for up t   | rty, or obtaining money or property by fraud o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1  | in connection with a 519, and 3571.  |
| nave r<br>nd cor<br>ankru                  | read the answerect. I under uptcy case ca                    | wers on this Stater<br>rstand that making<br>n result in fines up<br>/s/ Deloris ONeal<br>gnature of Debtor 1                       | nent of Finan<br>a false state<br>to \$250,000,                            | ncial Affairs and any atta<br>ment, concealing prope<br>or imprisonment for up t   | rty, or obtaining money or property by fraud o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1  Signature of Debtor 2  Date 2/11/2016   | in connection with a 519, and 3571.  |
| nave r<br>nnd con<br>ankru<br>id you<br>No | read the answerect. I under uptcy case ca                    | wers on this Stater rstand that making n result in fines up  /s/ Deloris ONeal gnature of Debtor 1 ate 2/11/2016 tional pages to Yo | nent of Finan<br>a false state<br>to \$250,000,<br>A o low<br>ur Statement | ncial Affairs and any atta<br>ment, concealing prope<br>or imprisonment for up t   | rty, or obtaining money or property by fraudo 20 years, or both. 18 U.S.C. §§ 152, 1341, 1  Signature of Debtor 2  Date 2/11/2016  Individuals Filing for Bankruptcy (Official F | in connection with a 519, and 3571.  |
| nave r<br>nod con<br>ankru<br>No<br>Yes    | read the answerect. I under uptcy case ca                    | wers on this Stater rstand that making n result in fines up  /s/ Deloris ONeal gnature of Debtor 1 ate 2/11/2016 tional pages to Yo | nent of Finan<br>a false state<br>to \$250,000,<br>A o low<br>ur Statement | ncial Affairs and any attament, concealing proper or imprisonment for up to the concentration of Financial Affairs for the concentration of the con | rty, or obtaining money or property by fraudo 20 years, or both. 18 U.S.C. §§ 152, 1341, 1  Signature of Debtor 2  Date 2/11/2016  Individuals Filing for Bankruptcy (Official F | in connection with a 519, and 3571.  |

### UNITED STATES BANKRUPTCY COURT

#### Northern District of Illinois

| re | Deloris ONeal ;  |  | Case No.                              |   |
|----|--|--|---------------------------------------|---|
| -  | Debtor   | Appropriate property and the state of the st |                                       | (If known)                              |
|    |  |  | Chapter                               | Chapter 13                              |
| 1. | DISCLOSURE C  Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. year before the filing of the petition in bankruptc in connection w ith the bankruptcy case is as fol | cy, or agreed to be paid to me, for service  | y for the abovenamed debtor(s) and t  | that compensation paid to me within one |
|    | For legal services, I have agreed to accept  |  |                                       | \$4,000.00                              |
|    | Prior to the filing of this statement I have receive   | ed   |                                       | \$400.00                                |
|    | Balance Due  |  |                                       | \$3,600.00                              |
| 2. | . The source of the compensation paid to me was Debtor   | s: Other (specify)   |                                       |   |
| 3. | . The source of the compensation paid to me is:  Debtor  | Other (specify)  |                                       |   |
| 4. | I have not agreed to share the above-disclomembers and associates of my law firm.  | osed compensation with any other persor  | າ unless they are                     |   |
|    | I have agreed to share the above-disclosed members or associates of my law firm. A c the people sharing in the compensation, is                                    | copy of the agreement, together with a list  |                                       | D.0                                     |
| 5. | In return for the above-disclosed fee, I have agr<br>a. Analysis of the debtor's financial situati   |  |                                       |   |
|    | b. Preparation and filing of any petition, so  | chedules, statements of affairs and plan   | which may be required;                |   |
|    | c. Representation of the debtor at the me  | eting of creditors and confirmation heari  | ng, and any adjourned hearings ther   | reof;                                   |
|    | d. Representation of the debtor in adversa   | ary proceedings and other contested ban  | ıkruptcy matters;                     |   |
| 6. | By agreement with the debtor(s), the above-disc  | closed fee does not include the following  | services:                             |   |
|    |  | CERTIFICATION  |                                       |   |
|    | I certify that the foregoing is a complete statement eedings.  | of any agreement or arrangement for pa   | syment to me for representation of th | ne debtor(s) in this bankruptcy         |
|    | 2/11/2016  |  | /s/ Mary Walters 6315822              |   |
|    | Date   |  | Signature of Attorney                 |   |
|    |  |  | Semrad Law Firm                       |   |
|    |  |  | Name of law firm                      |   |

### Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Main

### UNITEDOSTATES BANKRUP FEY COURT

Northern District of Illinois

| In re: | ONeal, Deloris ;                           | Case No   |  |
|--------|--|---|--|
|        | Debtor(s)                                  |   |  |
|        |  | Chapter   | Chapter13                                |
|        | VERIFICA                                   | TION OF CREDITOR MATR                                 | RIX                                      |
|        | The above named Debtors hereby verify that | the attached list of creditors is true and            | d correct to the best of their knowledge |
| ate:   | 2/11/2016                                  | /s/ ONeal, Deloris ONeal, Deloris Signature of Debtor | below Meal                               |
|        |  | /s/   |  |

Signature of Joint Debtor

| Debtor      | r 1                | Case 16-04583 Doc 1 Filed 02/15/16 Entered 02/15/16 09:54:16 Desc Mai  | n           |
|-------------|--------------------|--|-------------|
|             | 0-1-               | The state of the s | · va        |
|             |                    | culate the median family income that applies to you. Follow these steps:   | •           |
|             |                    | Fill in the state in which you live. Illinois  |             |
| 1           | 16b.               | Fill in the number of people in your household. 4  | ¢06 010 00  |
| 1           | 16c.               | Fill in the median family income for your state and size of household  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  | \$86,818.00 |
| 17. I       | How                | do the lines compare?  |             |
| 1           | 17a.               | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).   |             |
| 1           | 17b.               | 17b. q Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.   |             |
| art 3:      |                    | Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)   |             |
| 8. (        | Сор                | y your total average monthly income from line 11.  | \$2,900.00  |
| 9. <b>c</b> | <b>Ded</b><br>comi | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  |             |
| 1           | 19a.               | If the marital adjustment does not apply, fill in 0 on line 19a.   | -\$0.00     |
| 1           | 19b.               | Subtract line 19a from line 18.  | \$2,900.00  |
| .O. C       | Calc               | ulate your current monthly income for the year. Follow these steps:  |             |
| 2           | 20a.               | Copy line 19b.   | \$2,900.00  |
|             |                    | Multiply by 12 (the number of months in a year).   | x 12        |
| 2           | 20b.               | The result is your current monthly income for the year for this part of the form.  | \$34,800.00 |
| 2           | 20c.               | Copy the median family income for your state and size of household from line 16c.  | \$86,818.00 |
| 1. F        | low                | do the lines compare?  |             |
| E           | -                  | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.   |             |
|             |                    | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The</i> commitment period is 5 years. Go to Part 4.  |             |
| art 4:      | S                  | Sign Below   |             |
|             |                    | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   |             |
|             |                    | * /s/ Deloris ONeal Meal *   |             |
|             |                    | Signature of Debtor 1 Signature of Debtor 2  |             |
|             |                    | Date 2/11/2016 Date MM/DD/YYYY MM/DD/YYYY  |             |
|             |                    | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.  |             |